MEDPROS
FORCE HEALTH PROTECTION

# MEDPROS Web Data Entry (MWDE)
# User Guide

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# Revision History

| Version | Date | Description |
|---|---|---|
| 1.0 | 3/15/2012 | Initial release. This release replaced MND/LDP/PRG IMR fields with the six new DLCs (DL1-DL6) on SRP Checklist and Medical Readiness screen. It also limits DNA and HIV entries to “D” (drawn) and disallows use of draw dates >60 days in the past. |
| 2.0 | 1/15/2013 | The application shall now have the following reports: Pre-Deployments Health Assessment Report, Forms Completed by Providers Report, Pre/Post/PDHRA Count (Deployment Summary) Report, HCP Signature Required DD2900 Report, HCP Signature Required DD2795/2796 Report, Priority Soldier Report, RHRP Store and Forward Tracking Module Report, PDHRA Event Code Workflow Report, PDHRA Declination Report, and 2012 Reports. |
| 3.0 | 8/23/2013 | Removed instructions on completing all MHA forms. Refer to Instructions in MHA User Guide for completing those forms. Screen shots for Mass Immunizations updated to show new Influenza codes. |
| 4.0 | 11/6/2013 | Modified screen shot for SRP Checklist (p7), PULHES History (p27) and Physical Exam (p28) each of which now show profile codes listed in correct hierarchy order. |
| 4.1 | 2/14/2014 | Minor spelling correction made on Page six, DL7 added to Note on Page 6 defining what DL ratings drive MR 3B |
| 4.2 | 6/24/2014 | Modified screenshot for Medical Readiness screen on page 30 to reflect removal of Medical/Commander Exemptions fields. |
| 4.3 | 11/3/2014 | Modified screenshot for SRP checklist (p7) and the Medical Readiness (p30) to include VA Disability Information. |
| 4.4 | 5/29/2015 | Modified screenshot for SRP Checklist (p7) to show link on NCAT date in Remarks column) |
| 4.5 | 7/19/2015 | Modified SRP Checklist page 6 to show ability to drilldown to NCAT Report history. |

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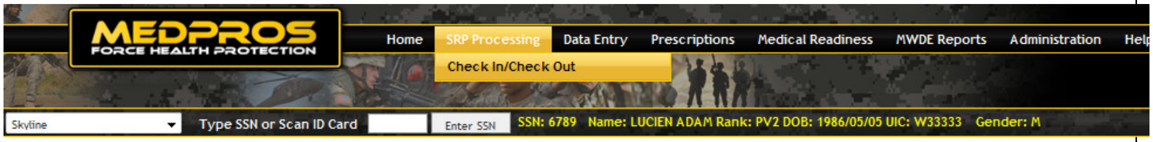
# 1.0 SRP Processing

## 1.1 Check In/Check Out

| Step | User Action |
|---|---|
| 1. | Login to MWDE with your CAC card. |
| 2. | Select your location and enter the SSN of the individual at the top left of the screen and click Enter SSN. The Individual's name and information will appear across the top of the screen. |

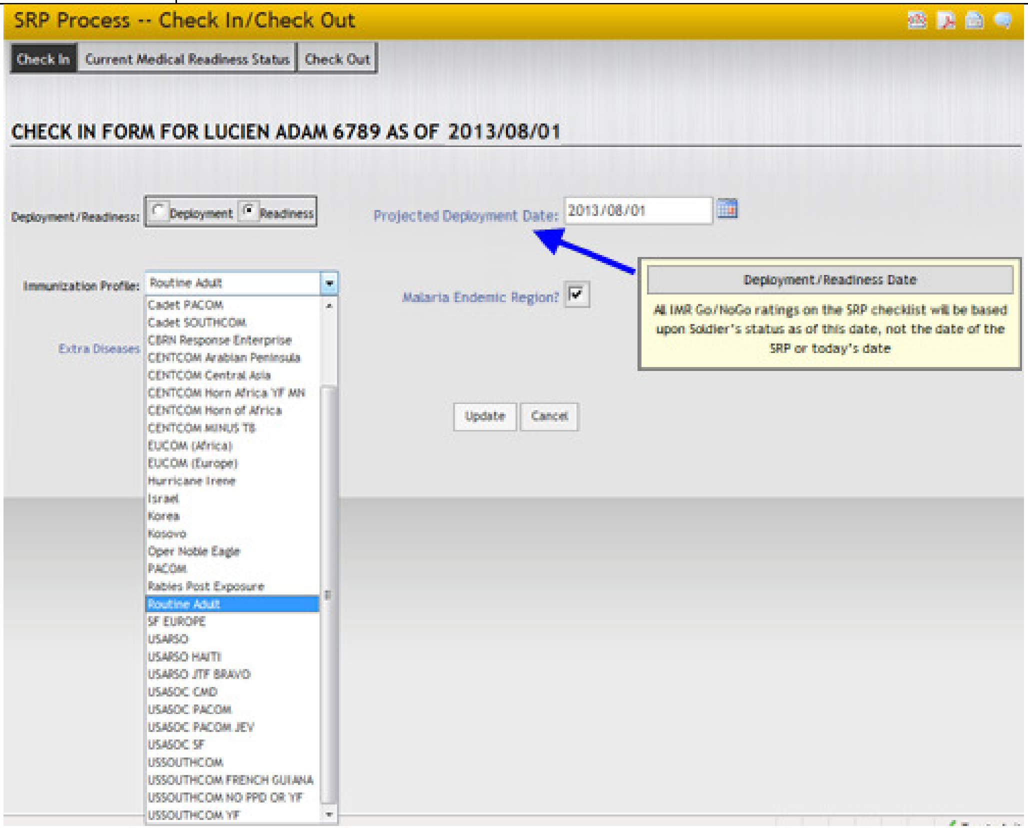

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
Check In/Check Out
Enter SSN

Skyline

Type SSN or Scan ID Card

SSN: 6789 Name: LUCIEN ADAM Rank: PV2 DOB: 1986/05/05 UIC: W33333 Gender: M

| Step | User Action |
|---|---|
| 3. | Hover over SRP Processing and select Click Check In/Check Out. |


SRP Process -- Check In/Check Out
Check In
Current Medical Readiness Status
Check Out
Extra Diseases
Cadet PACOM
Cadet SOUTHCOM
CBRN Response Enterprise
CENTCOM Arabian Peninsula
CENTCOM Central Asia
CENTCOM Horn Africa YF MN
CENTCOM Horn of Africa
CENTCOM MINUS TB
EUCOM (Africa)
EUCOM (Europe)
Hurricane Irene
Israel
Korea
Kosovo
Oper Noble Eagle
PACOM
Rabies Post Exposure
Routine Adult
SF EUROPE
USARSO
USARSO HAITI
USARSO JTF BRAVO
USASOC CMD
USASOC PACOM
USASOC PACOM JEV
USASOC SF
USSOUTHCOM
USSOUTHCOM FRENCH GUIANA
USSOUTHCOM NO PPD OR YF
USSOUTHCOM YF
Update
Cancel

CHECK IN FORM FOR LUCIEN ADAM 6789 AS OF 2013/08/01

Deployment/Readiness: ○ Deployment ● Readiness

Projected Deployment Date: 2013/08/01

Immunization Profile: Routine Adult

Malaria Endemic Region? ☑

Deployment/Readiness Date

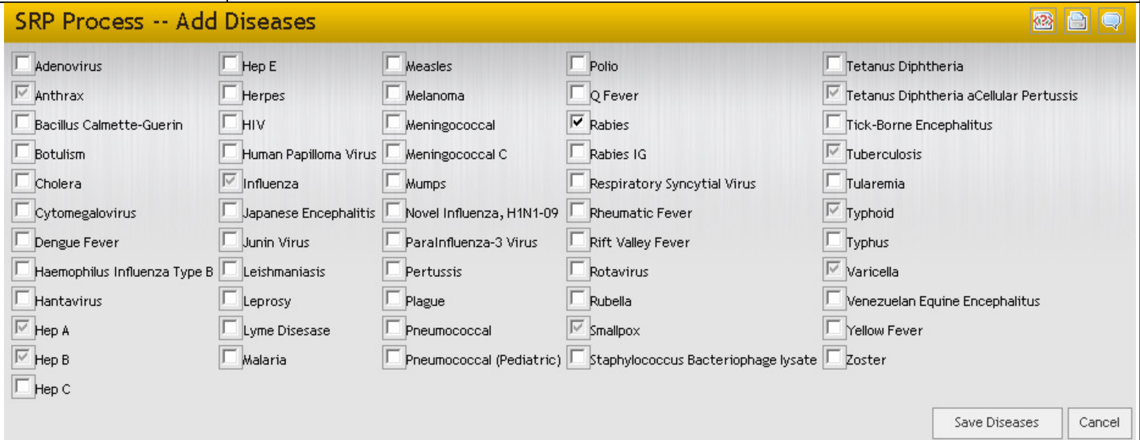
All IMR Go/NoGo ratings on the SRP checklist will be based upon Soldier's status as of this date, not the date of the SRP or today's date

| Step | User Action |
|---|---|
| 4. | Select the Deployment or Readiness radio button. |
| 5. | Enter the "Projected Deployment Date" or "Readiness Data As Of Date." |
| 6. | Select the Immunization Profile from the drop down menu. |

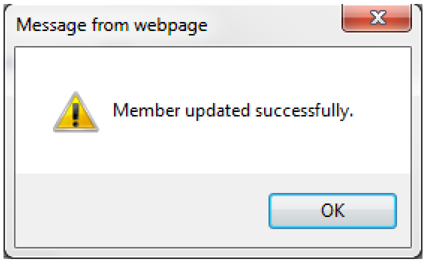
| Step | User Action |
|---|---|
| 7. | Check Malaria Endemic Region to include the Malaria screening only if Soldier is deploying to a Malaria endemic area. This will trigger the need for completion of a Malaria Questionnaire on the Soldier's SRP checklist. |

**Note: The Malaria Endemic Region text is a hyperlink that will allow you to view the risk information and prophylaxis by country.**

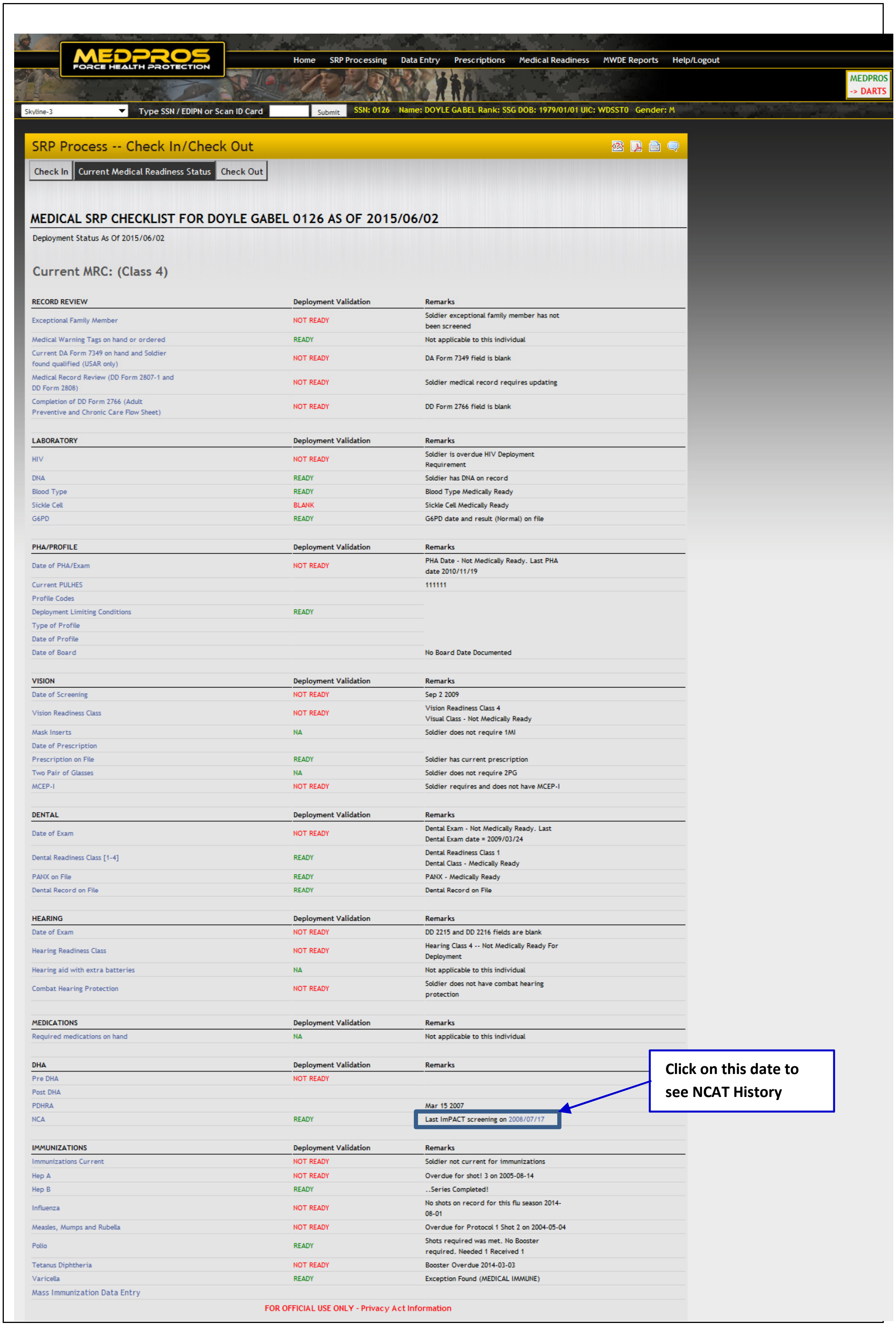
| Step | User Action |
|---|---|
| 8. | Click Extra Diseases to check off any additional diseases to be added for the Soldiers situation. (For example, rabies for Veterinary personnel) Any selected diseases will be included with the profile immunization requirements for that Soldier on the Checklist. |


SRP Process -- Add Diseases

☐ Adenovirus
☑ Anthrax
☐ Bacillus Calmette-Guerin
☐ Botulism
☐ Cholera
☐ Cytomegalovirus
☐ Dengue Fever
☐ Haemophilus Influenza Type B
☐ Hantavirus
☑ Hep A
☑ Hep B
☐ Hep C
☐ Hep E
☐ Herpes
☐ HIV
☐ Human Papilloma Virus
☑ Influenza
☐ Japanese Encephalitis
☐ Junin Virus
☐ Leishmaniasis
☐ Leprosy
☐ Lyme Disesase
☐ Malaria
☐ Measles
☐ Melanoma
☐ Meningococcal
☐ Meningococcal C
☐ Mumps
☐ Novel Influenza, H1N1-09
☐ ParaInfluenza-3 Virus
☐ Pertussis
☐ Plague
☐ Pneumococcal
☐ Pneumococcal (Pediatric)
☐ Polio
☐ Q Fever
☑ Rabies
☐ Rabies IG
☐ Respiratory Syncytial Virus
☐ Rheumatic Fever
☐ Rift Valley Fever
☐ Rotavirus
☐ Rubella
☑ Smallpox
☐ Staphylococcus Bacteriophage lysate
☐ Tetanus Diphtheria
☑ Tetanus Diphtheria aCellular Pertussis
☐ Tick-Borne Encephalitus
☑ Tuberculosis
☐ Tularemia
☑ Typhoid
☐ Typhus
☑ Varicella
☐ Venezuelan Equine Encephalitus
☐ Yellow Fever
☐ Zoster

| Step | User Action |
|---|---|
| 9. | Click **Save Diseases**. Selected Extra Diseases will now be listed on the Check in Screen. |
| 10. | Click **Update**. The selected information will be updated and continue to be displayed. A "Member Updated Successfully" confirmation pop-up message will appear (Click ok).<br><br>Message from webpage<br>Member updated successfully.<br> |
| 11. | Click on **Current Medical Readiness Status**. The Soldier's Current Medical Readiness checklist with nine areas will open displaying Soldier's status for each IMR/IMM requirement based on filters selected during check in as well as the Soldier's overall MRC Rating (MR 1, 2, 3A, 3B, or 4). |

**Note: The MND, LDP, and PRG fields were replaced by the Deployment Limiting Condition field in the PHA /Profile Section – if none, will be "Ready." DL1-DL5 and DL7=MR 3B; DL6=MR 3A**



SSN: 0126 Name: DOYLE GABEL Rank: SSG DOB: 1979/01/01 UIC: WDSST0 Gender: M

SRP Process -- Check In/Check Out
Check In
Current Medical Readiness Status
Check Out

## MEDICAL SRP CHECKLIST FOR DOYLE GABEL 0126 AS OF 2015/06/02

Deployment Status As Of 2015/06/02

### Current MRC: (Class 4)

| RECORD REVIEW | Deployment Validation | Remarks |
|---|---|---|
| Exceptional Family Member | NOT READY | Soldier exceptional family member has not been screened |
| Medical Warning Tags on hand or ordered | READY | Not applicable to this individual |
| Current DA Form 7349 on hand and Soldier found qualified (USAR only) | NOT READY | DA Form 7349 field is blank |
| Medical Record Review (DD Form 2807-1 and DD Form 2808) | NOT READY | Soldier medical record requires updating |
| Completion of DD Form 2766 (Adult Preventive and Chronic Care Flow Sheet) | NOT READY | DD Form 2766 field is blank |

| LABORATORY | Deployment Validation | Remarks |
|---|---|---|
| HIV | NOT READY | Soldier is overdue HIV Deployment Requirement |
| DNA | READY | Soldier has DNA on record |
| Blood Type | READY | Blood Type Medically Ready |
| Sickle Cell | BLANK | Sickle Cell Medically Ready |
| G6PD | READY | G6PD date and result (Normal) on file |

| PHA/PROFILE | Deployment Validation | Remarks |
|---|---|---|
| Date of PHA/Exam | NOT READY | PHA Date - Not Medically Ready. Last PHA date 2010/11/19 |
| Current PULHES | | 111111 |
| Profile Codes | | |
| Deployment Limiting Conditions | READY | |
| Type of Profile | | |
| Date of Profile | | |
| Date of Board | | No Board Date Documented |

| VISION | Deployment Validation | Remarks |
|---|---|---|
| Date of Screening | NOT READY | Sep 2 2009 |
| Vision Readiness Class | NOT READY | Vision Readiness Class 4<br>Visual Class - Not Medically Ready |
| Mask Inserts | NA | Soldier does not require 1MI |
| Date of Prescription | | |
| Prescription on File | READY | Soldier has current prescription |
| Two Pair of Glasses | NA | Soldier does not require 2PG |
| MCEP-I | NOT READY | Soldier requires and does not have MCEP-I |

| DENTAL | Deployment Validation | Remarks |
|---|---|---|
| Date of Exam | NOT READY | Dental Exam - Not Medically Ready. Last Dental Exam date = 2009/03/24 |
| Dental Readiness Class [1-4] | READY | Dental Readiness Class 1<br>Dental Class - Medically Ready |
| PANX on File | READY | PANX - Medically Ready |
| Dental Record on File | READY | Dental Record on File |

| HEARING | Deployment Validation | Remarks |
|---|---|---|
| Date of Exam | NOT READY | DD 2215 and DD 2216 fields are blank |
| Hearing Readiness Class | NOT READY | Hearing Class 4 -- Not Medically Ready For Deployment |
| Hearing aid with extra batteries | NA | Not applicable to this individual |
| Combat Hearing Protection | NOT READY | Soldier does not have combat hearing protection |

| MEDICATIONS | Deployment Validation | Remarks |
|---|---|---|
| Required medications on hand | NA | Not applicable to this individual |

| DHA | Deployment Validation | Remarks |
|---|---|---|
| Pre DHA | NOT READY | |
| Post DHA | | |
| PDHRA | | Mar 15 2007 |
| NCA | READY | Last ImPACT screening on 2008/07/17 |

**Click on this date to see NCAT History**

| IMMUNIZATIONS | Deployment Validation | Remarks |
|---|---|---|
| Immunizations Current | NOT READY | Soldier not current for immunizations |
| Hep A | NOT READY | Overdue for shot! 3 on 2005-08-14 |
| Hep B | READY | ..Series Completed! |
| Influenza | NOT READY | No shots on record for this flu season 2014-08-01 |
| Measles, Mumps and Rubella | NOT READY | Overdue for Protocol 1 Shot 2 on 2004-05-04 |
| Polio | READY | Shots required was met. No Booster required. Needed 1 Received 1 |
| Tetanus Diphtheria | NOT READY | Booster Overdue 2014-03-03 |
| Varicella | READY | Exception Found (MEDICAL IMMUNE) |
| Mass Immunization Data Entry | | |

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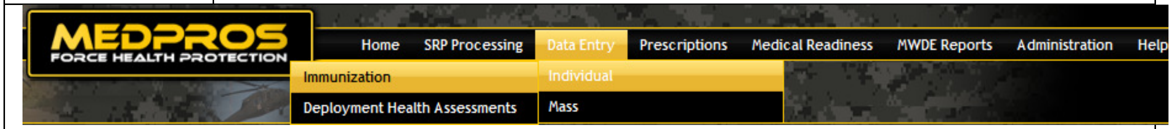
| | |
|---|---|
| 12. | Use the hyperlinks to update information as necessary. (Example of hyperlink is circled above.) The hyperlink takes you to the selected module within the application where that requirement is listed. Clicking on date hyperlink for NCA will open NCAT history display. |

# 2.0 Data Entry

## 2.1 Individual/Immunization

| Step | User Action |
|---|---|
| 1. | Hover over Data Entry, down to Individual, and select Immunization. |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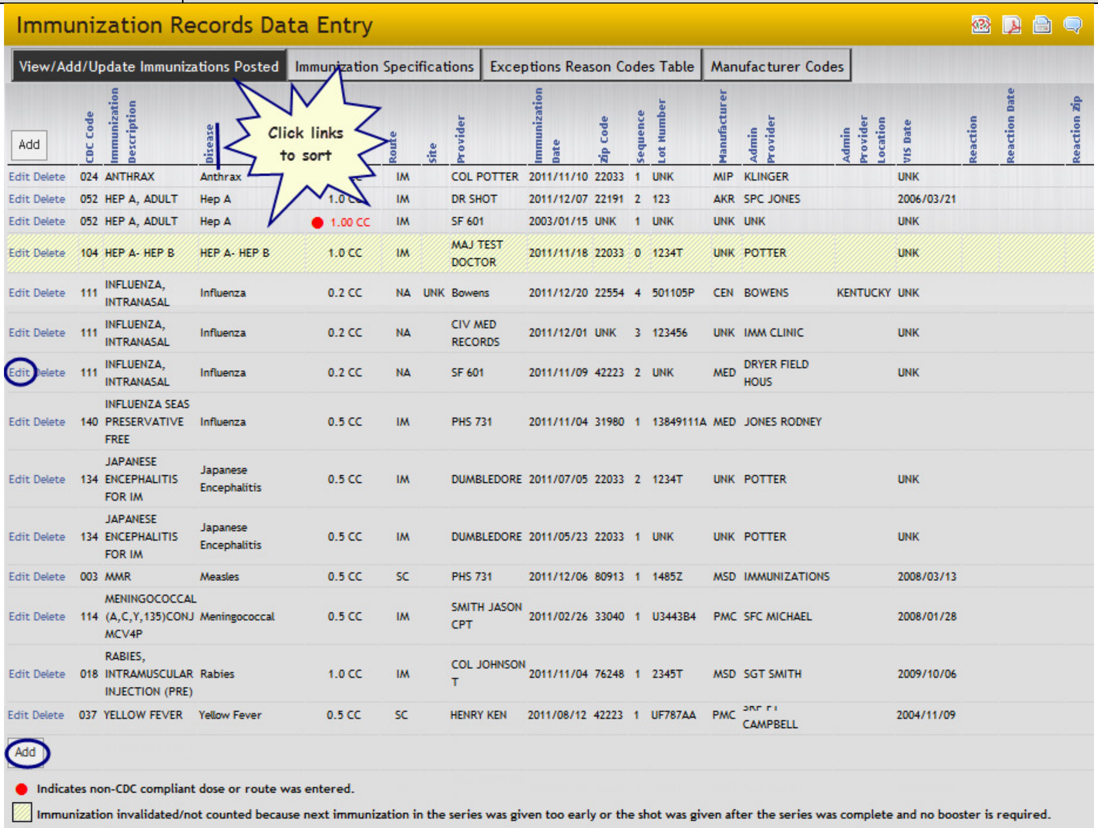
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
Immunization
Deployment Health Assessments
Individual
Mass

| | |
|---|---|
| 2. | Immunizations already listed for a Soldier may be edited by clicking Edit. Screen will appear available for updating data for the immunization. (**NOTE**: Immunization name and date may not be edited. If incorrect, user must delete bad entry and repost correct entry. |
| 3. | Immunizations of a Soldier may be added by clicking **Add**. Screen will appear with appropriate data fields required for adding an immunization. |

| Step | User Action |
|---|---|


Immunization Records Data Entry
View/Add/Update Immunizations Posted
Immunization Specifications
Exceptions Reason Codes Table
Manufacturer Codes
Click links to sort
Add

| Add | CDC Code | Immunization Description | Disease | | Route | Site | Provider | Immunization Date | Zip Code | Sequence | Lot Number | Manufacturer | Admin Provider | Admin Provider Location | VIS Date | Reaction | Reaction Date | Reaction Zip |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Edit Delete | 024 | ANTHRAX | Anthrax | | IM | | COL POTTER | 2011/11/10 | 22033 | 1 | UNK | MIP | KLINGER | | UNK | | | |
| Edit Delete | 052 | HEP A, ADULT | Hep A | 1.0 CC | IM | | DR SHOT | 2011/12/07 | 22191 | 2 | 123 | AKR | SPC JONES | | 2006/03/21 | | | |
| Edit Delete | 052 | HEP A, ADULT | Hep A | ● 1.00 CC | IM | | SF 601 | 2003/01/15 | UNK | 1 | UNK | UNK | UNK | | UNK | | | |
| Edit Delete | 104 | HEP A- HEP B | HEP A- HEP B | 1.0 CC | IM | | MAJ TEST DOCTOR | 2011/11/18 | 22033 | 0 | 1234T | UNK | POTTER | | UNK | | | |
| Edit Delete | 111 | INFLUENZA, INTRANASAL | Influenza | 0.2 CC | NA | UNK | Bowens | 2011/12/20 | 22554 | 4 | 501105P | CEN | BOWENS | KENTUCKY | UNK | | | |
| Edit Delete | 111 | INFLUENZA, INTRANASAL | Influenza | 0.2 CC | NA | | CIV MED RECORDS | 2011/12/01 | UNK | 3 | 123456 | UNK | IMM CLINIC | | UNK | | | |
| Edit Delete | 111 | INFLUENZA, INTRANASAL | Influenza | 0.2 CC | NA | | SF 601 | 2011/11/09 | 42223 | 2 | UNK | MED | DRYER FIELD HOUS | | UNK | | | |
| Edit Delete | 140 | INFLUENZA SEAS PRESERVATIVE FREE | Influenza | 0.5 CC | IM | | PHS 731 | 2011/11/04 | 31980 | 1 | 13849111A | MED | JONES RODNEY | | | | | |
| Edit Delete | 134 | JAPANESE ENCEPHALITIS FOR IM | Japanese Encephalitis | 0.5 CC | IM | | DUMBLEDORE | 2011/07/05 | 22033 | 2 | 1234T | UNK | POTTER | | UNK | | | |
| Edit Delete | 134 | JAPANESE ENCEPHALITIS FOR IM | Japanese Encephalitis | 0.5 CC | IM | | DUMBLEDORE | 2011/05/23 | 22033 | 1 | UNK | UNK | POTTER | | UNK | | | |
| Edit Delete | 003 | MMR | Measles | 0.5 CC | SC | | PHS 731 | 2011/12/06 | 80913 | 1 | 1485Z | MSD | IMMUNIZATIONS | | 2008/03/13 | | | |
| Edit Delete | 114 | MENINGOCOCCAL (A,C,Y,135)CONJ MCV4P | Meningococcal | 0.5 CC | IM | | SMITH JASON CPT | 2011/02/26 | 33040 | 1 | U3443B4 | PMC | SFC MICHAEL | | 2008/01/28 | | | |
| Edit Delete | 018 | RABIES, INTRAMUSCULAR INJECTION (PRE) | Rabies | 1.0 CC | IM | | COL JOHNSON T | 2011/11/04 | 76248 | 1 | 2345T | MSD | SGT SMITH | | 2009/10/06 | | | |
| Edit Delete | 037 | YELLOW FEVER | Yellow Fever | 0.5 CC | SC | | HENRY KEN | 2011/08/12 | 42223 | 1 | UF787AA | PMC | CAMPBELL | | 2004/11/09 | | | |

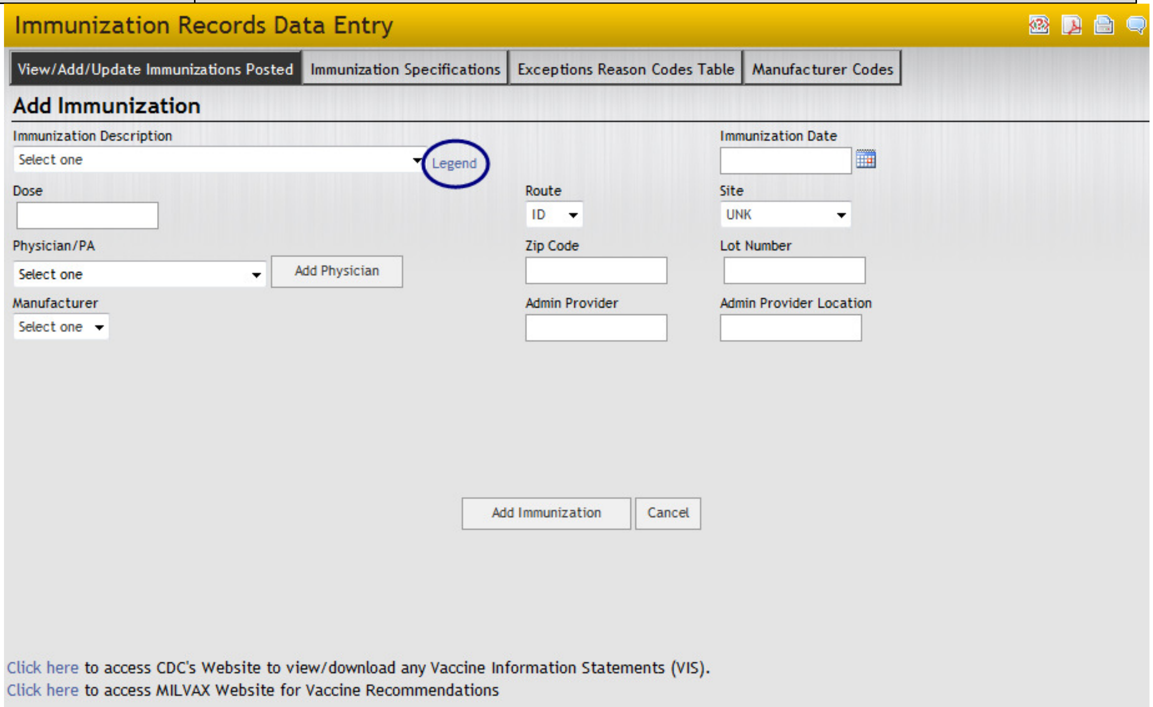
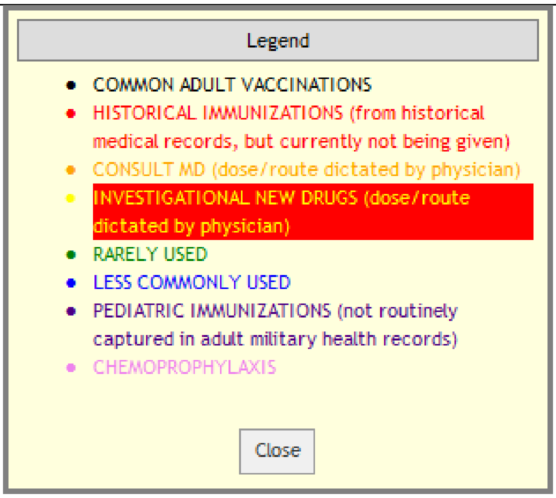
Add

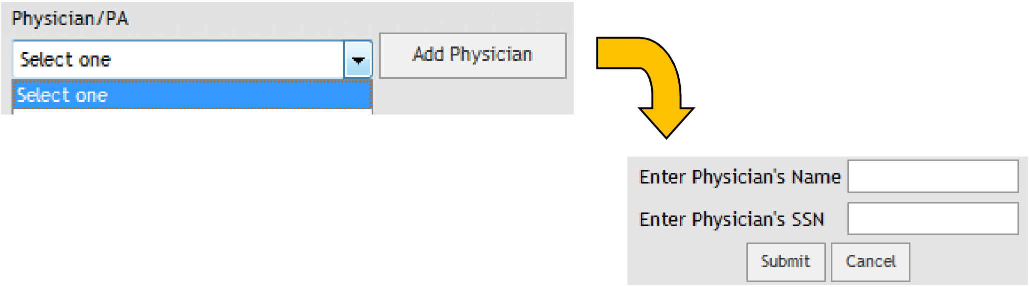
● Indicates non-CDC compliant dose or route was entered.

▨ Immunization invalidated/not counted because next immunization in the series was given too early or the shot was given after the series was complete and no booster is required.

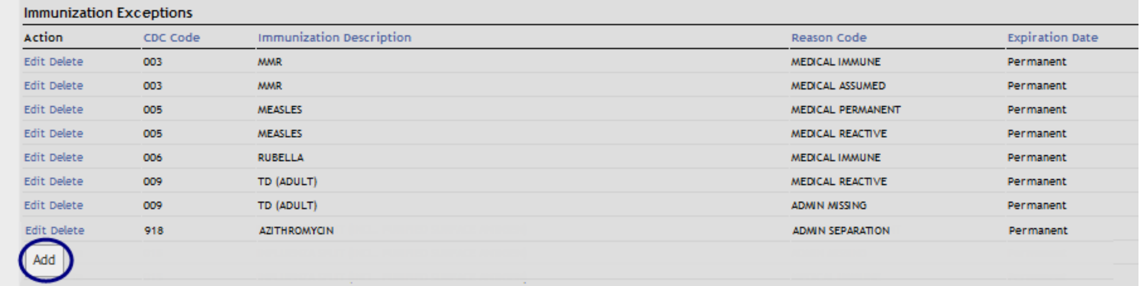
**Note: Default Sort is by Disease Name. To resort by another column, click the column header you want the list sorted by.**

| | |
|---|---|
| 4. | Immunizations administered to a Soldier that are not present on their record may be added by clicking either of the Add buttons just above or below the listed immunizations. Screen will appear for adding an immunization. |

| Step | User Action |
|---|---|
|  |  Immunization Records Data Entry<br>View/Add/Update Immunizations Posted<br>Immunization Specifications<br>Exceptions Reason Codes Table<br>Manufacturer Codes<br>Add Immunization<br>Immunization Description<br>Select one<br>Legend<br>Immunization Date<br>Dose<br>Route<br>ID<br>Site<br>UNK<br>Physician/PA<br>Select one<br>Add Physician<br>Zip Code<br>Lot Number<br>Manufacturer<br>Select one<br>Admin Provider<br>Admin Provider Location<br>Add Immunization<br>Cancel<br>Click here to access CDC's Website to view/download any Vaccine Information Statements (VIS).<br>Click here to access MILVAX Website for Vaccine Recommendations |
| 5. | Click "Legend" to view dropdown legend which identifies the category, by font and/or highlight color, of the immunizations displayed. (**NOTE**: Most immunizations Soldiers receive are listed in Common Adult category) |
|  | Legend<br>● COMMON ADULT VACCINATIONS<br>● HISTORICAL IMMUNIZATIONS (from historical medical records, but currently not being given)<br>● CONSULT MD (dose/route dictated by physician)<br>● INVESTIGATIONAL NEW DRUGS (dose/route dictated by physician)<br>● RARELY USED<br>● LESS COMMONLY USED<br>● PEDIATRIC IMMUNIZATIONS (not routinely captured in adult military health records)<br>● CHEMOPROPHYLAXIS<br> |
| 6. | Select immunization to be posted from the Immunization Description drop down. |
| 7. | Enter the dosage in the Dose text box if blank or default dose is not what was administered. |

| Step | User Action |
|---|---|
| 8. | Select a Physician/PA from the drop down menu. If not listed, you may add one. |
| |  Physician/PA<br>Select one<br>Select one<br>Add Physician<br>Enter Physician's Name<br>Enter Physician's SSN<br>Submit<br>Cancel |
| 9. | Select Manufacturer. (**NOTE**: MIP (Emergent Biodefense Operations Lansing) will auto-populate when Anthrax selected). If you do not know the Manufacturer code you can click on the Manufacturer Code tab at the top of the grey area on the screen and look it up by the manufacturer listed on the vaccine vial or box. |
| 10. | Enter the Admin Provider (the person who administered immunization to Soldier – i.e. SGT John Smith). |
| 11. | Enter the Admin Provider Location. (name of clinic or facility where shots administered – not the City, which is identified by the Zip Code) |
| 12. | Select the Route from the drop down if blank or route administered does not match the default route populated. |
| 13. | Enter the Zip Code where the immunization was administered. |
| 14. | Enter the date (or select the date from the pop-up calendar to right of date field) the immunization was given in the Immunization Date box. |
| 15. | When known, select the site on the body where the immunization was given from the Site dropdown menu (optional but encouraged, leave as UNK for intranasal influenza). |
| 16. | Enter the Lot number of the immunization. (**NOTE**: Anthrax and Smallpox will have dropdown of available lot numbers for user selection) |
| 17. | Enter date of Vaccine Information Statement (VIS) provided to Soldier for that immunization (when one is available). (NOTE: the system is programmed to know the latest and previous VIS dates and will produce an error message if those dates not entered. Click on Immunization |

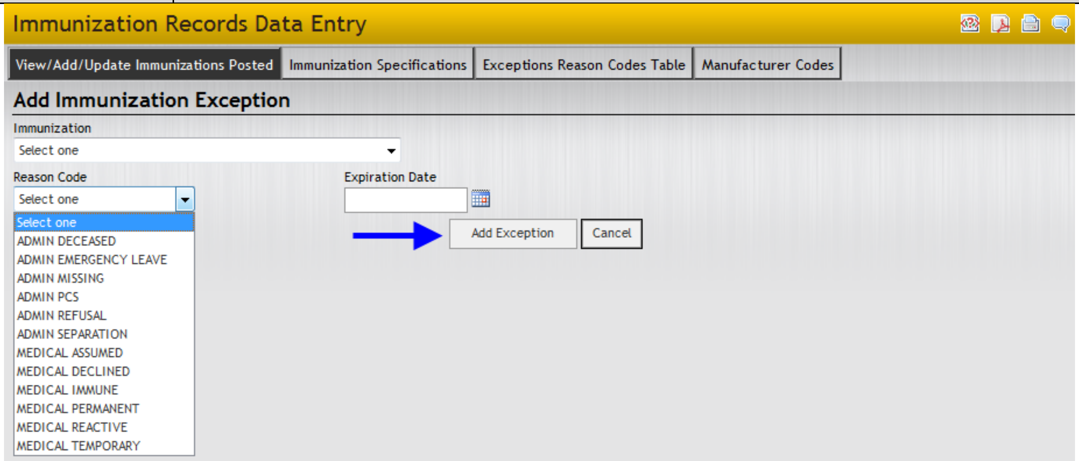
| Step | User Action |
|---|---|
| | Specifications table tab to see latest VIS dates for immunization administered.) |
| 18. | Click **Add Immunization**. Immunization will be added and can be viewed in the Immunization Record of the Soldier. (If you need to abort the update, click “Cancel”). |
| 19. | Within the View/Add/Update Immunizations Posted tab, you may Add, Edit or Delete Exceptions in the area below the Immunizations received area. To add an exception, click the Add button below the Immunization Exception area. A screen of filters will be displayed. |



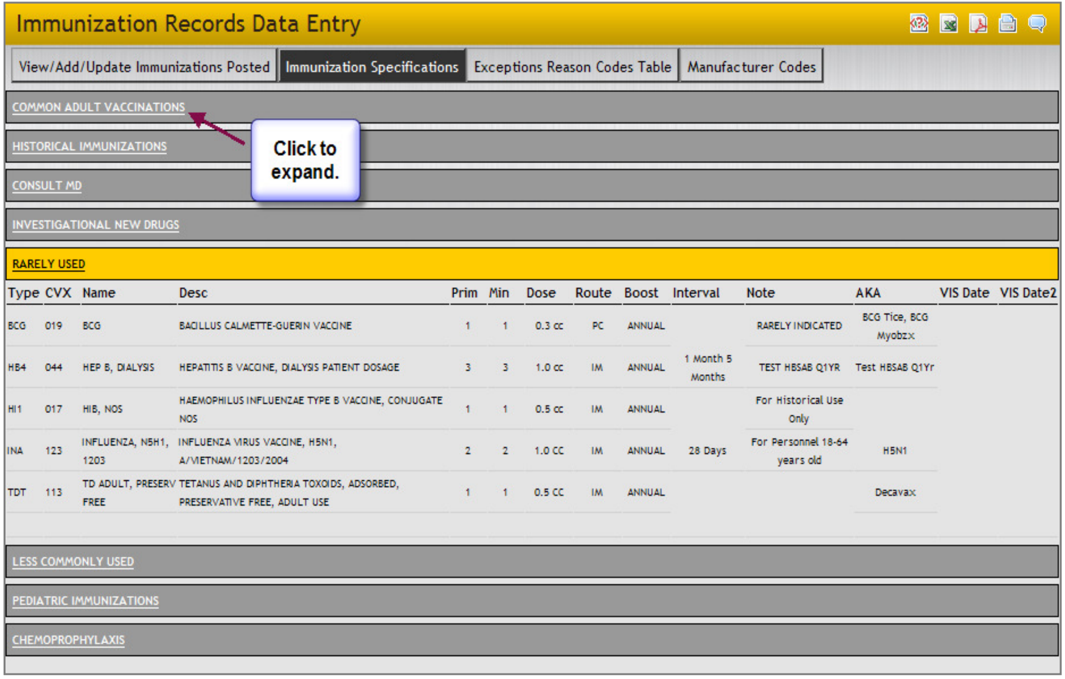
Immunization Exceptions

| Action | CDC Code | Immunization Description | Reason Code | Expiration Date |
|---|---|---|---|---|
| Edit Delete | 003 | MMR | MEDICAL IMMUNE | Permanent |
| Edit Delete | 003 | MMR | MEDICAL ASSUMED | Permanent |
| Edit Delete | 005 | MEASLES | MEDICAL PERMANENT | Permanent |
| Edit Delete | 005 | MEASLES | MEDICAL REACTIVE | Permanent |
| Edit Delete | 006 | RUBELLA | MEDICAL IMMUNE | Permanent |
| Edit Delete | 009 | TD (ADULT) | MEDICAL REACTIVE | Permanent |
| Edit Delete | 009 | TD (ADULT) | ADMIN MISSING | Permanent |
| Edit Delete | 918 | AZITHROMYCIN | ADMIN SEPARATION | Permanent |

| | |
|---|---|
| 20. | Select an immunization from the drop down menu. |
| 21. | Select a Reason Code from the drop down menu. (See Exception Reason Codes table for codes and their full definitions if unsure of which one to use). |
| **Note: Available Reason codes list will be unique per immunization chosen.** | |
| 22. | Enter an Expiration Date for Temporary Exceptions. Exceptions that are permanent will default to permanent when their code is selected. |
| 23. | Click **Add Exception**. (If you want to abort adding an exception, click the “Cancel” button). |

| Step | User Action |
|---|---|
|  |  |

Immunization Records Data Entry
View/Add/Update Immunizations Posted
Immunization Specifications
Exceptions Reason Codes Table
Manufacturer Codes
Add Immunization Exception
Immunization
Select one
Reason Code
Select one
Select one
ADMIN DECEASED
ADMIN EMERGENCY LEAVE
ADMIN MISSING
ADMIN PCS
ADMIN REFUSAL
ADMIN SEPARATION
MEDICAL ASSUMED
MEDICAL DECLINED
MEDICAL IMMUNE
MEDICAL PERMANENT
MEDICAL REACTIVE
MEDICAL TEMPORARY
Expiration Date
Add Exception
Cancel

| Step | User Action |
|---|---|
| 24. | To view details of immunizations, click **Immunization Specifications** tab. |
|  |  |

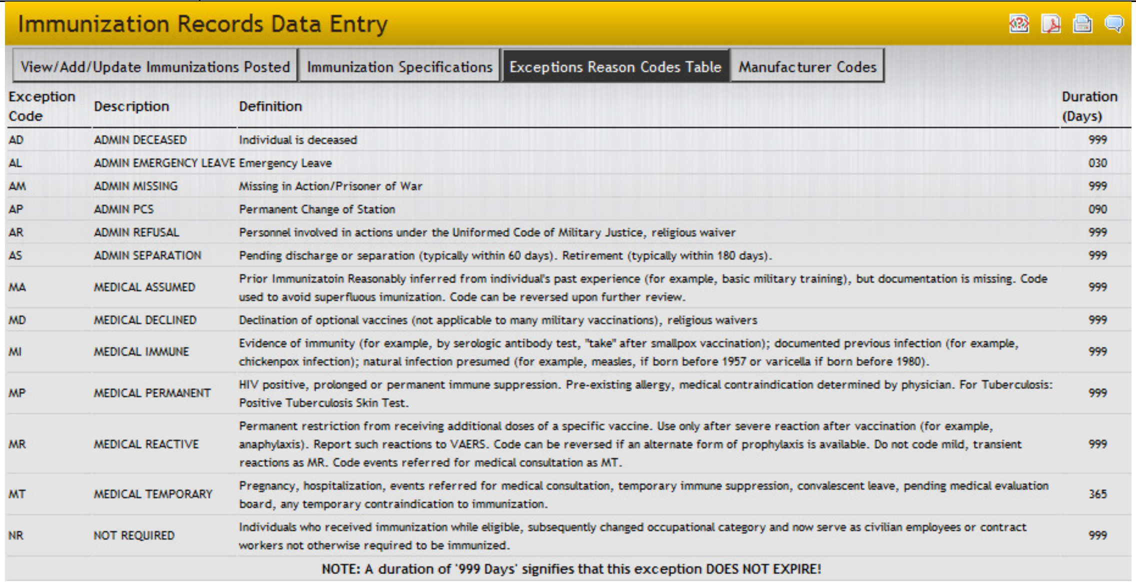
Immunization Records Data Entry
View/Add/Update Immunizations Posted
Immunization Specifications
Exceptions Reason Codes Table
Manufacturer Codes
COMMON ADULT VACCINATIONS
Click to expand.
HISTORICAL IMMUNIZATIONS
CONSULT MD
INVESTIGATIONAL NEW DRUGS
RARELY USED

| Type | CVX | Name | Desc | Prim | Min | Dose | Route | Boost | Interval | Note | AKA | VIS Date | VIS Date2 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BCG | 019 | BCG | BACILLUS CALMETTE-GUERIN VACCINE | 1 | 1 | 0.3 cc | PC | ANNUAL |  | RARELY INDICATED | BCG Tice, BCG Myobzx |  |  |
| HB4 | 044 | HEP B, DIALYSIS | HEPATITIS B VACCINE, DIALYSIS PATIENT DOSAGE | 3 | 3 | 1.0 cc | IM | ANNUAL | 1 Month 5 Months | TEST HBSAB Q1YR | Test HBSAB Q1Yr |  |  |
| HI1 | 017 | HIB, NOS | HAEMOPHILUS INFLUENZAE TYPE B VACCINE, CONJUGATE NOS | 1 | 1 | 0.5 cc | IM | ANNUAL |  | For Historical Use Only |  |  |  |
| INA | 123 | INFLUENZA, N5H1, 1203 | INFLUENZA VIRUS VACCINE, H5N1, A/VIETNAM/1203/2004 | 2 | 2 | 1.0 CC | IM | ANNUAL | 28 Days | For Personnel 18-64 years old | H5N1 |  |  |
| TDT | 113 | TD ADULT, PRESERV FREE | TETANUS AND DIPHTHERIA TOXOIDS, ADSORBED, PRESERVATIVE FREE, ADULT USE | 1 | 1 | 0.5 CC | IM | ANNUAL |  |  | Decavax |  |  |

LESS COMMONLY USED
PEDIATRIC IMMUNIZATIONS
CHEMOPROPHYLAXIS

| Step | User Action |
|---|---|
| 25. | To view exception reason codes and their descriptions, click **Exceptions Reason Code Table**.<br>Exception codes, their definitions, and max durations will be listed in detail. (NOTE: “999” indicated permanent exceptions that will not expire) |

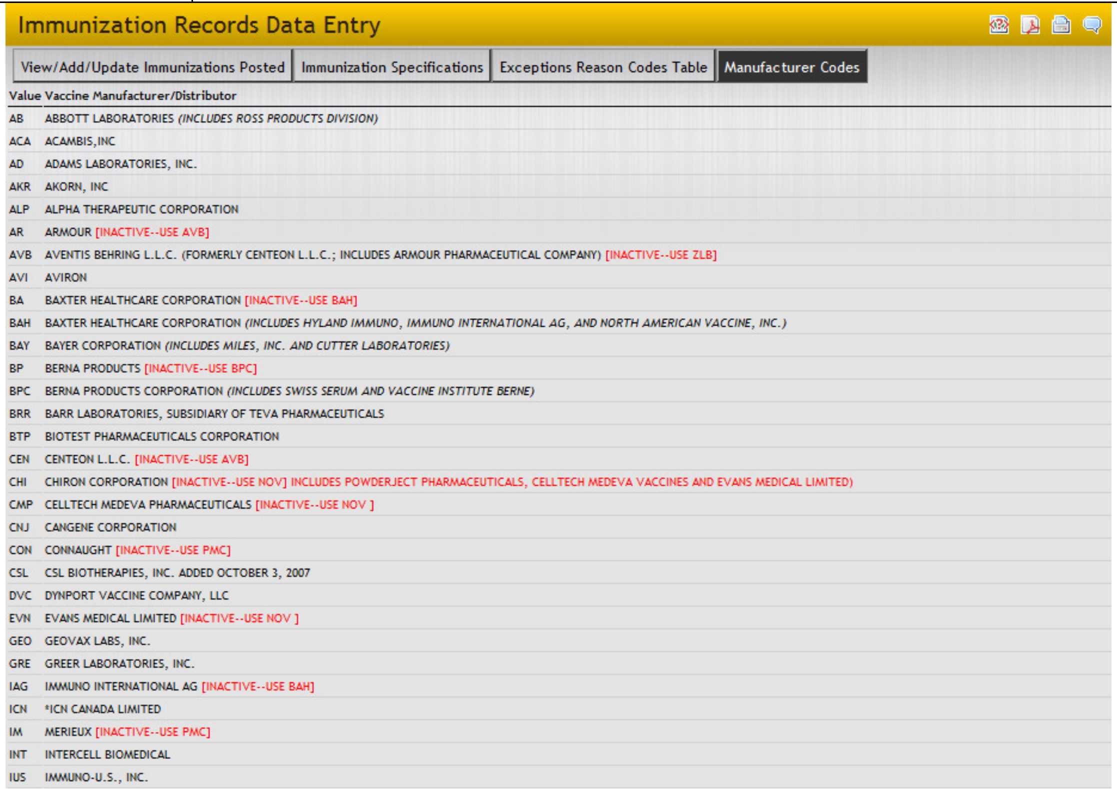
| Step | User Action |
|---|---|


Immunization Records Data Entry
View/Add/Update Immunizations Posted
Immunization Specifications
Exceptions Reason Codes Table
Manufacturer Codes

| Exception Code | Description | Definition | Duration (Days) |
|---|---|---|---|
| AD | ADMIN DECEASED | Individual is deceased | 999 |
| AL | ADMIN EMERGENCY LEAVE | Emergency Leave | 030 |
| AM | ADMIN MISSING | Missing in Action/Prisoner of War | 999 |
| AP | ADMIN PCS | Permanent Change of Station | 090 |
| AR | ADMIN REFUSAL | Personnel involved in actions under the Uniformed Code of Military Justice, religious waiver | 999 |
| AS | ADMIN SEPARATION | Pending discharge or separation (typically within 60 days). Retirement (typically within 180 days). | 999 |
| MA | MEDICAL ASSUMED | Prior Immunizatoin Reasonably inferred from individual's past experience (for example, basic military training), but documentation is missing. Code used to avoid superfluous imunization. Code can be reversed upon further review. | 999 |
| MD | MEDICAL DECLINED | Declination of optional vaccines (not applicable to many military vaccinations), religious waivers | 999 |
| MI | MEDICAL IMMUNE | Evidence of immunity (for example, by serologic antibody test, "take" after smallpox vaccination); documented previous infection (for example, chickenpox infection); natural infection presumed (for example, measles, if born before 1957 or varicella if born before 1980). | 999 |
| MP | MEDICAL PERMANENT | HIV positive, prolonged or permanent immune suppression. Pre-existing allergy, medical contraindication determined by physician. For Tuberculosis: Positive Tuberculosis Skin Test. | 999 |
| MR | MEDICAL REACTIVE | Permanent restriction from receiving additional doses of a specific vaccine. Use only after severe reaction after vaccination (for example, anaphylaxis). Report such reactions to VAERS. Code can be reversed if an alternate form of prophylaxis is available. Do not code mild, transient reactions as MR. Code events referred for medical consultation as MT. | 999 |
| MT | MEDICAL TEMPORARY | Pregnancy, hospitalization, events referred for medical consultation, temporary immune suppression, convalescent leave, pending medical evaluation board, any temporary contraindication to immunization. | 365 |
| NR | NOT REQUIRED | Individuals who received immunization while eligible, subsequently changed occupational category and now serve as civilian employees or contract workers not otherwise required to be immunized. | 999 |

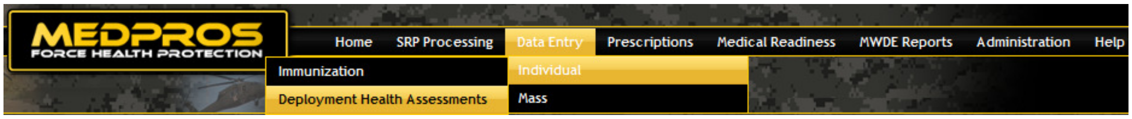
NOTE: A duration of '999 Days' signifies that this exception DOES NOT EXPIRE!

| | |
|---|---|
| 26. | To view manufacturer codes and their distributors, click **Manufacturer Codes**. |


Immunization Records Data Entry
View/Add/Update Immunizations Posted
Immunization Specifications
Exceptions Reason Codes Table
Manufacturer Codes

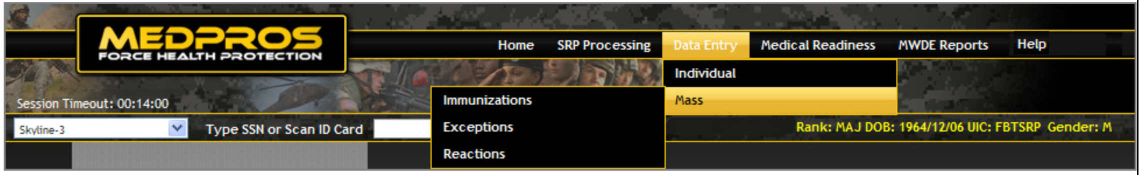
| Value | Vaccine Manufacturer/Distributor |
|---|---|
| AB | ABBOTT LABORATORIES *(INCLUDES ROSS PRODUCTS DIVISION)* |
| ACA | ACAMBIS,INC |
| AD | ADAMS LABORATORIES, INC. |
| AKR | AKORN, INC |
| ALP | ALPHA THERAPEUTIC CORPORATION |
| AR | ARMOUR [INACTIVE--USE AVB] |
| AVB | AVENTIS BEHRING L.L.C. (FORMERLY CENTEON L.L.C.; INCLUDES ARMOUR PHARMACEUTICAL COMPANY) [INACTIVE--USE ZLB] |
| AVI | AVIRON |
| BA | BAXTER HEALTHCARE CORPORATION [INACTIVE--USE BAH] |
| BAH | BAXTER HEALTHCARE CORPORATION *(INCLUDES HYLAND IMMUNO, IMMUNO INTERNATIONAL AG, AND NORTH AMERICAN VACCINE, INC.)* |
| BAY | BAYER CORPORATION *(INCLUDES MILES, INC. AND CUTTER LABORATORIES)* |
| BP | BERNA PRODUCTS [INACTIVE--USE BPC] |
| BPC | BERNA PRODUCTS CORPORATION *(INCLUDES SWISS SERUM AND VACCINE INSTITUTE BERNE)* |
| BRR | BARR LABORATORIES, SUBSIDIARY OF TEVA PHARMACEUTICALS |
| BTP | BIOTEST PHARMACEUTICALS CORPORATION |
| CEN | CENTEON L.L.C. [INACTIVE--USE AVB] |
| CHI | CHIRON CORPORATION [INACTIVE--USE NOV] INCLUDES POWDERJECT PHARMACEUTICALS, CELLTECH MEDEVA VACCINES AND EVANS MEDICAL LIMITED) |
| CMP | CELLTECH MEDEVA PHARMACEUTICALS [INACTIVE--USE NOV ] |
| CNJ | CANGENE CORPORATION |
| CON | CONNAUGHT [INACTIVE--USE PMC] |
| CSL | CSL BIOTHERAPIES, INC. ADDED OCTOBER 3, 2007 |
| DVC | DYNPORT VACCINE COMPANY, LLC |
| EVN | EVANS MEDICAL LIMITED [INACTIVE--USE NOV ] |
| GEO | GEOVAX LABS, INC. |
| GRE | GREER LABORATORIES, INC. |
| IAG | IMMUNO INTERNATIONAL AG [INACTIVE--USE BAH] |
| ICN | *ICN CANADA LIMITED |
| IM | MERIEUX [INACTIVE--USE PMC] |
| INT | INTERCELL BIOMEDICAL |
| IUS | IMMUNO-U.S., INC. |

## 2.2 Individual/Deployment Health Assessments

| **Pre Deployment DD2795** | |
|---|---|
| **Step** | **User Action** |
| 1. | Hover over Data Entry, Individual, and select Deployment Health Assessments.  You will be re-routed to the Medical Health Assessments (MHA) application where forms can be completed and viewed. |
|  | |

Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
Immunization
Deployment Health Assessments
Individual
Mass

## 2.3 Mass/Immunizations

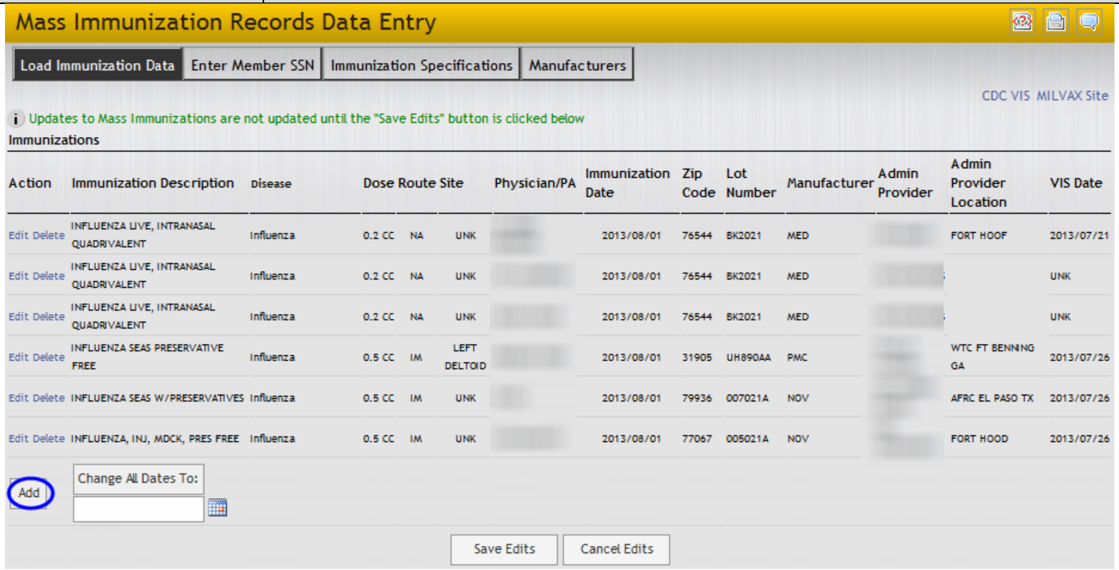
| **Step** | **User Action** |
|---|---|
| 1. | Hover over Data Entry, down to Mass, and select Immunizations.  The **Load Immunizations Data** tab will be highlighted and its screen will be displayed. |
|  | |
| 2. | To add an immunization, click **Add**.  A new window will reveal text boxes available for immunization entry. |

Session Timeout: 00:14:00

Rank: MAJ DOB: 1964/12/06 UIC: FBTSRP  Gender: M

Home
SRP Processing
Data Entry
Medical Readiness
MWDE Reports
Help
Individual
Mass
Immunizations
Exceptions
Reactions
Skyline-3
Type SSN or Scan ID Card

| Step | User Action |
|---|---|


Mass Immunization Records Data Entry
Load Immunization Data
Enter Member SSN
Immunization Specifications
Manufacturers
CDC VIS
MILVAX Site

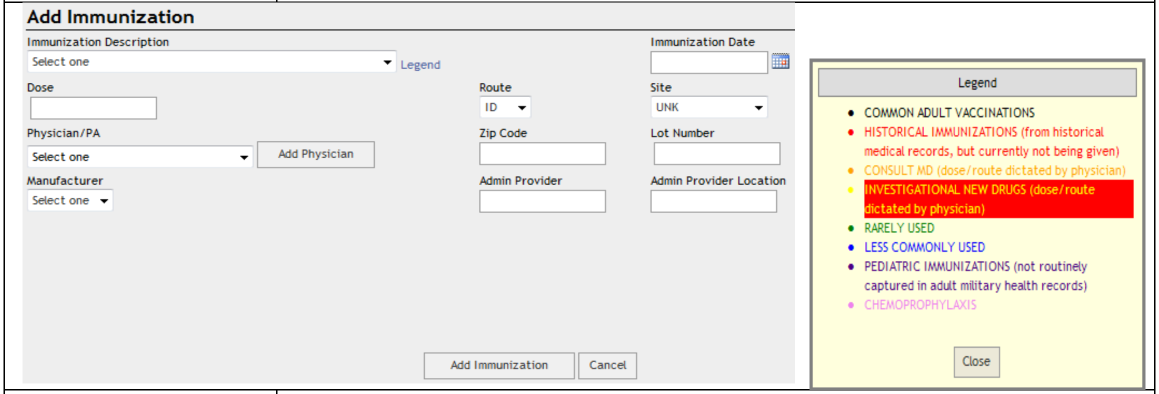
Updates to Mass Immunizations are not updated until the "Save Edits" button is clicked below

Immunizations

| Action | Immunization Description | Disease | Dose | Route | Site | Physician/PA | Immunization Date | Zip Code | Lot Number | Manufacturer | Admin Provider | Admin Provider Location | VIS Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Edit Delete | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | Influenza | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | 76544 | BK2021 | MED | [redacted] | FORT HOOF | 2013/07/21 |
| Edit Delete | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | Influenza | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | 76544 | BK2021 | MED | [redacted] |  | UNK |
| Edit Delete | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | Influenza | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | 76544 | BK2021 | MED | [redacted] |  | UNK |
| Edit Delete | INFLUENZA SEAS PRESERVATIVE FREE | Influenza | 0.5 CC | IM | LEFT DELTOID | [redacted] | 2013/08/01 | 31905 | UH890AA | PMC | [redacted] | WTC FT BENNING GA | 2013/07/26 |
| Edit Delete | INFLUENZA SEAS W/PRESERVATIVES | Influenza | 0.5 CC | IM | UNK | [redacted] | 2013/08/01 | 79936 | 007021A | NOV | [redacted] | AFRC EL PASO TX | 2013/07/26 |
| Edit Delete | INFLUENZA, INJ, MDCK, PRES FREE | Influenza | 0.5 CC | IM | UNK | [redacted] | 2013/08/01 | 77067 | 005021A | NOV | [redacted] | FORT HOOD | 2013/07/26 |

Add
Change All Dates To:
Save Edits
Cancel Edits

| Step | User Action |
|---|---|
| 3. | Click **Legend** to view legend. |


Add Immunization
Legend
Add Physician
Add Immunization
Cancel
Close

Immunization Description: Select one

Immunization Date:

Dose:

Route: ID

Site: UNK

Physician/PA: Select one

Zip Code:

Lot Number:

Manufacturer: Select one

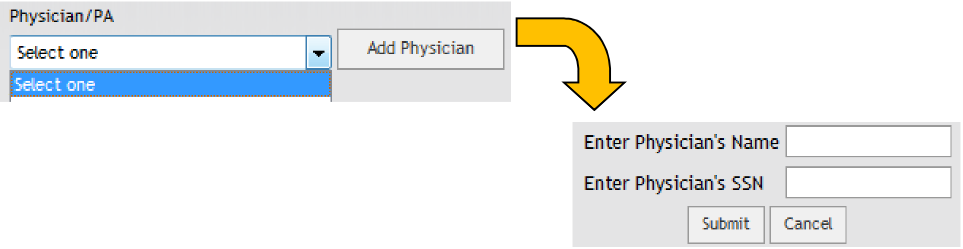
Admin Provider:

Admin Provider Location:

Legend

- COMMON ADULT VACCINATIONS
- HISTORICAL IMMUNIZATIONS (from historical medical records, but currently not being given)
- CONSULT MD (dose/route dictated by physician)
- INVESTIGATIONAL NEW DRUGS (dose/route dictated by physician)
- RARELY USED
- LESS COMMONLY USED
- PEDIATRIC IMMUNIZATIONS (not routinely captured in adult military health records)
- CHEMOPROPHYLAXIS

| Step | User Action |
|---|---|
| 4. | Select immunization from the Immunization Description from the drop down. |
| 5. | Enter the dosage in the Dose text box (only if blank or default dose in not what was administered). |
| 6. | Select a Physician/PA from the drop down menu.  If not listed, you may add one. |


Physician/PA
Add Physician
Submit
Cancel

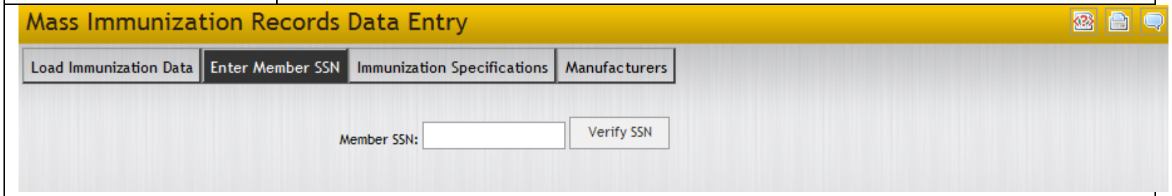
Physician/PA: Select one

Select one

Enter Physician's Name

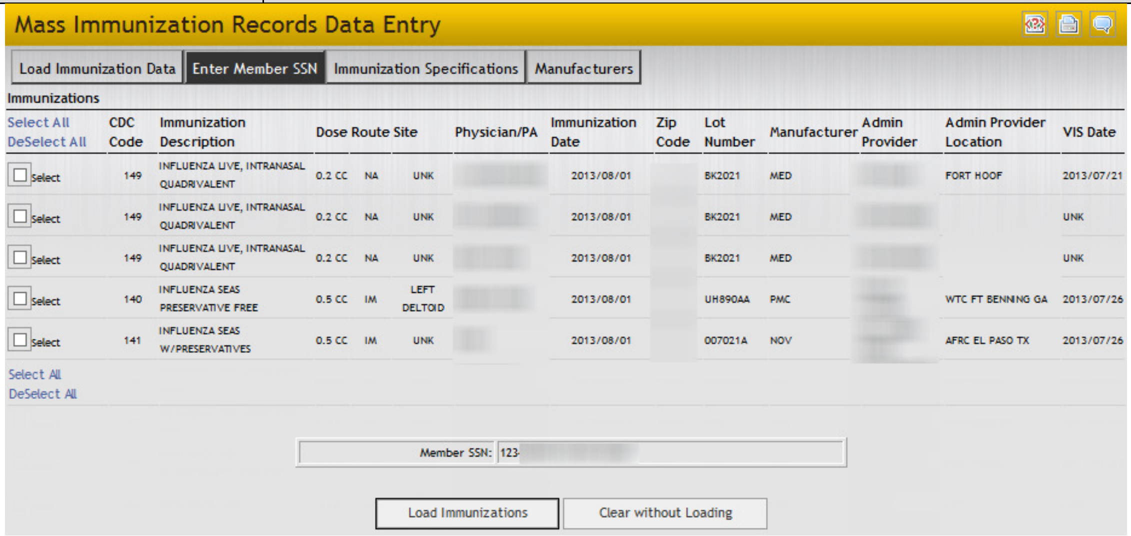
Enter Physician's SSN

| Step | User Action |
|---|---|
| 7. | Select Manufacturer. (Click on Manufacturer Code tab to lookup code if unknown) |
| 8. | Enter the Admin Provider. (person who gave the vaccination, i.e. SGT John Smith) |
| 9. | Enter the Admin Provider Location. (This is name of clinic or MTF, not the city/installation as Zip Code provides that information) |
| 10. | Enter the Route from the drop down menu. (only if blank or default route is not the route given) |
| 11. | Enter the Zip Code where the immunization was given. |
| 12. | Enter the date the immunization was given |
| 13. | Enter the site on the body the immunization was given. (This is optional, but encouraged. Leave as “unknown” if you do not know.) |
| 14. | Enter the Lot number of the immunization. (Note: Anthrax (FAV***) and Smallpox (VV04-003A) lot numbers are in system and you will get an error if entered incorrectly) |
| 15. | Click **Add Immunization**. |
| 16. | Click **Enter Member SSN** and enter SSN of Soldier for verification. |


Mass Immunization Records Data Entry
Load Immunization Data
Enter Member SSN
Immunization Specifications
Manufacturers
Member SSN:
Verify SSN

|  |  |
|---|---|
| 17. | Click **Verify SSN**. Service Member’s name and immunizations will appear and will be ready to load immunizations. |

| Step | User Action |
|---|---|


Mass Immunization Records Data Entry
Load Immunization Data
Enter Member SSN
Immunization Specifications
Manufacturers

Immunizations

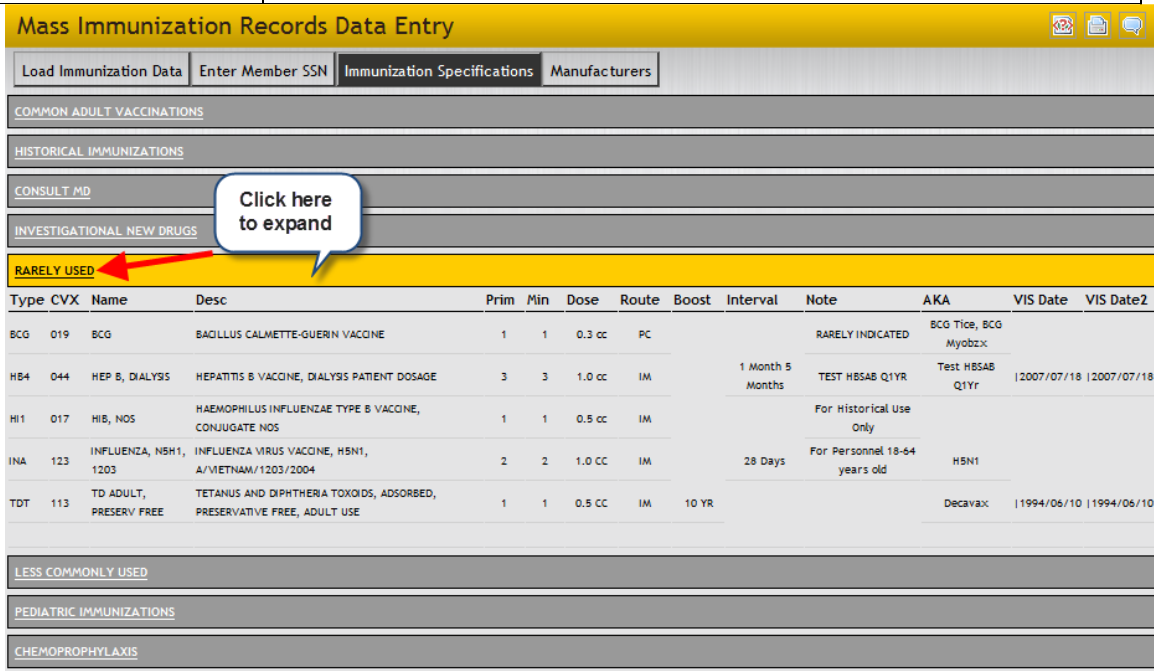
| Select All<br>DeSelect All | CDC Code | Immunization Description | Dose | Route | Site | Physician/PA | Immunization Date | Zip Code | Lot Number | Manufacturer | Admin Provider | Admin Provider Location | VIS Date |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ☐ Select | 149 | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | [redacted] | BK2021 | MED | [redacted] | FORT HOOF | 2013/07/21 |
| ☐ Select | 149 | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | [redacted] | BK2021 | MED | [redacted] | | UNK |
| ☐ Select | 149 | INFLUENZA LIVE, INTRANASAL QUADRIVALENT | 0.2 CC | NA | UNK | [redacted] | 2013/08/01 | [redacted] | BK2021 | MED | [redacted] | | UNK |
| ☐ Select | 140 | INFLUENZA SEAS PRESERVATIVE FREE | 0.5 CC | IM | LEFT DELTOID | [redacted] | 2013/08/01 | [redacted] | UH890AA | PMC | [redacted] | WTC FT BENNING GA | 2013/07/26 |
| ☐ Select | 141 | INFLUENZA SEAS W/PRESERVATIVES | 0.5 CC | IM | UNK | [redacted] | 2013/08/01 | [redacted] | 007021A | NOV | [redacted] | AFRC EL PASO TX | 2013/07/26 |

Select All
DeSelect All

Member SSN: 123-[redacted]

Load Immunizations
Clear without Loading

| Step | User Action |
|---|---|
| 18. | Select the immunizations administered to the Soldier by checking the box to their left, then click "**Load Immunizations**". Repeat steps 16-18 as necessary to record all immunizations given during mass immunization event. |
| 19. | To view details of immunizations, click **Immunization Specifications**. |

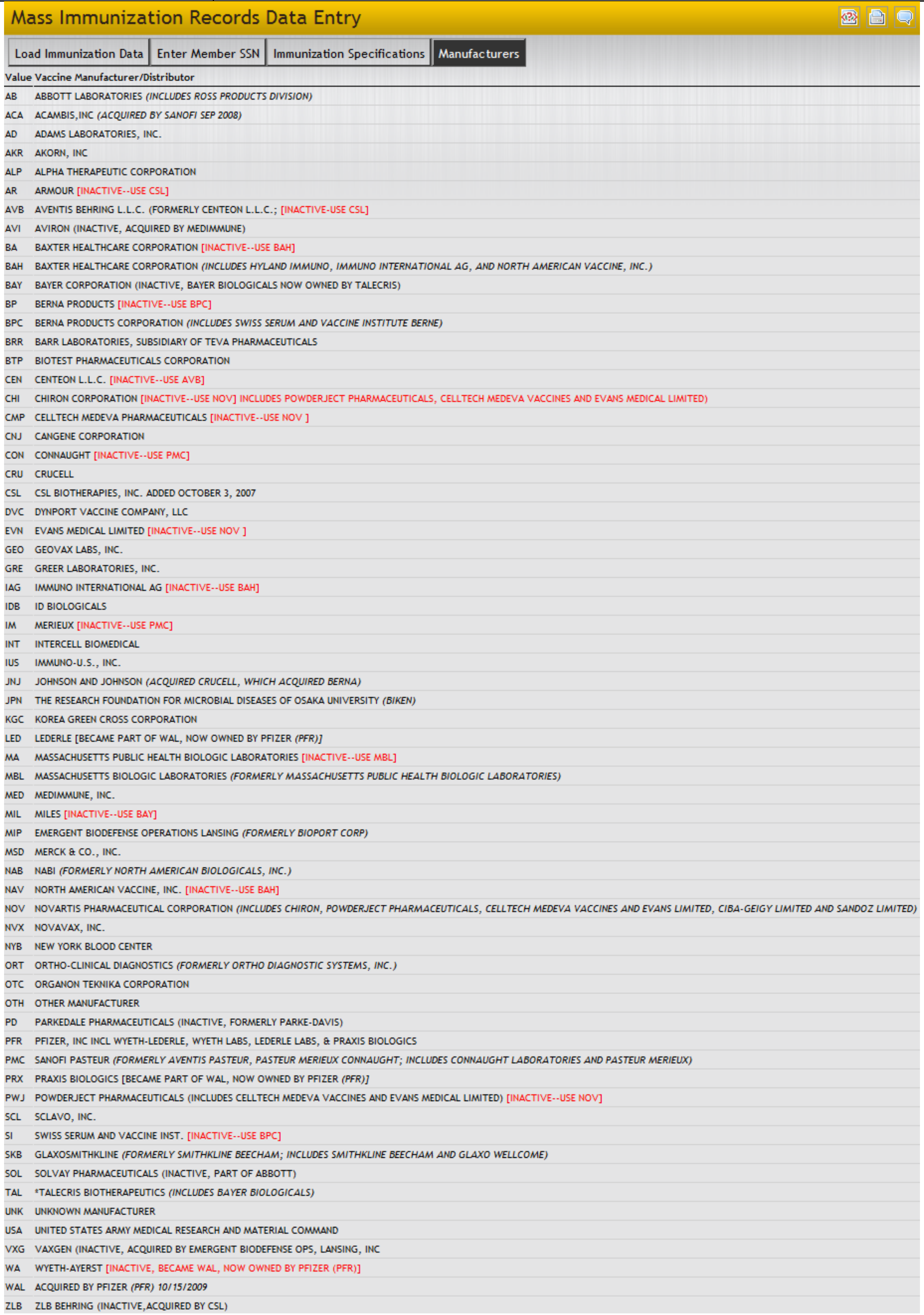

Mass Immunization Records Data Entry
Load Immunization Data
Enter Member SSN
Immunization Specifications
Manufacturers
COMMON ADULT VACCINATIONS
HISTORICAL IMMUNIZATIONS
CONSULT MD
INVESTIGATIONAL NEW DRUGS
Click here to expand
RARELY USED

| Type | CVX | Name | Desc | Prim | Min | Dose | Route | Boost | Interval | Note | AKA | VIS Date | VIS Date2 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BCG | 019 | BCG | BACILLUS CALMETTE-GUERIN VACCINE | 1 | 1 | 0.3 cc | PC | | | RARELY INDICATED | BCG Tice, BCG Myobzx | | |
| HB4 | 044 | HEP B, DIALYSIS | HEPATITIS B VACCINE, DIALYSIS PATIENT DOSAGE | 3 | 3 | 1.0 cc | IM | | 1 Month 5 Months | TEST HBSAB Q1YR | Test HBSAB Q1Yr | \|2007/07/18 | \|2007/07/18 |
| HI1 | 017 | HIB, NOS | HAEMOPHILUS INFLUENZAE TYPE B VACCINE, CONJUGATE NOS | 1 | 1 | 0.5 cc | IM | | | For Historical Use Only | | | |
| INA | 123 | INFLUENZA, N5H1, 1203 | INFLUENZA VIRUS VACCINE, H5N1, A/VIETNAM/1203/2004 | 2 | 2 | 1.0 CC | IM | | 28 Days | For Personnel 18-64 years old | H5N1 | | |
| TDT | 113 | TD ADULT, PRESERV FREE | TETANUS AND DIPHTHERIA TOXOIDS, ADSORBED, PRESERVATIVE FREE, ADULT USE | 1 | 1 | 0.5 CC | IM | 10 YR | | | Decavax | \|1994/06/10 | \|1994/06/10 |

LESS COMMONLY USED
PEDIATRIC IMMUNIZATIONS
CHEMOPROPHYLAXIS

| Step | User Action |
|---|---|
| 20. | To view manufacturer codes and their distributors, click **Manufacturers.** |

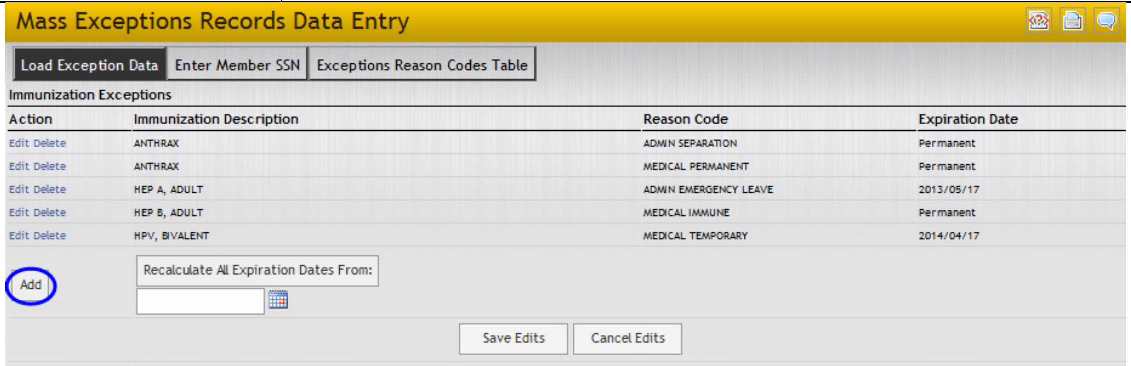
| Step | User Action |
|---|---|


Mass Immunization Records Data Entry
Load Immunization Data
Enter Member SSN
Immunization Specifications
Manufacturers

| Value | Vaccine Manufacturer/Distributor |
|---|---|
| AB | ABBOTT LABORATORIES *(INCLUDES ROSS PRODUCTS DIVISION)* |
| ACA | ACAMBIS,INC *(ACQUIRED BY SANOFI SEP 2008)* |
| AD | ADAMS LABORATORIES, INC. |
| AKR | AKORN, INC |
| ALP | ALPHA THERAPEUTIC CORPORATION |
| AR | ARMOUR [INACTIVE--USE CSL] |
| AVB | AVENTIS BEHRING L.L.C. (FORMERLY CENTEON L.L.C.; [INACTIVE-USE CSL] |
| AVI | AVIRON (INACTIVE, ACQUIRED BY MEDIMMUNE) |
| BA | BAXTER HEALTHCARE CORPORATION [INACTIVE--USE BAH] |
| BAH | BAXTER HEALTHCARE CORPORATION *(INCLUDES HYLAND IMMUNO, IMMUNO INTERNATIONAL AG, AND NORTH AMERICAN VACCINE, INC.)* |
| BAY | BAYER CORPORATION (INACTIVE, BAYER BIOLOGICALS NOW OWNED BY TALECRIS) |
| BP | BERNA PRODUCTS [INACTIVE--USE BPC] |
| BPC | BERNA PRODUCTS CORPORATION *(INCLUDES SWISS SERUM AND VACCINE INSTITUTE BERNE)* |
| BRR | BARR LABORATORIES, SUBSIDIARY OF TEVA PHARMACEUTICALS |
| BTP | BIOTEST PHARMACEUTICALS CORPORATION |
| CEN | CENTEON L.L.C. [INACTIVE--USE AVB] |
| CHI | CHIRON CORPORATION [INACTIVE--USE NOV] INCLUDES POWDERJECT PHARMACEUTICALS, CELLTECH MEDEVA VACCINES AND EVANS MEDICAL LIMITED) |
| CMP | CELLTECH MEDEVA PHARMACEUTICALS [INACTIVE--USE NOV ] |
| CNJ | CANGENE CORPORATION |
| CON | CONNAUGHT [INACTIVE--USE PMC] |
| CRU | CRUCELL |
| CSL | CSL BIOTHERAPIES, INC. ADDED OCTOBER 3, 2007 |
| DVC | DYNPORT VACCINE COMPANY, LLC |
| EVN | EVANS MEDICAL LIMITED [INACTIVE--USE NOV ] |
| GEO | GEOVAX LABS, INC. |
| GRE | GREER LABORATORIES, INC. |
| IAG | IMMUNO INTERNATIONAL AG [INACTIVE--USE BAH] |
| IDB | ID BIOLOGICALS |
| IM | MERIEUX [INACTIVE--USE PMC] |
| INT | INTERCELL BIOMEDICAL |
| IUS | IMMUNO-U.S., INC. |
| JNJ | JOHNSON AND JOHNSON *(ACQUIRED CRUCELL, WHICH ACQUIRED BERNA)* |
| JPN | THE RESEARCH FOUNDATION FOR MICROBIAL DISEASES OF OSAKA UNIVERSITY *(BIKEN)* |
| KGC | KOREA GREEN CROSS CORPORATION |
| LED | LEDERLE [BECAME PART OF WAL, NOW OWNED BY PFIZER *(PFR)]* |
| MA | MASSACHUSETTS PUBLIC HEALTH BIOLOGIC LABORATORIES [INACTIVE--USE MBL] |
| MBL | MASSACHUSETTS BIOLOGIC LABORATORIES *(FORMERLY MASSACHUSETTS PUBLIC HEALTH BIOLOGIC LABORATORIES)* |
| MED | MEDIMMUNE, INC. |
| MIL | MILES [INACTIVE--USE BAY] |
| MIP | EMERGENT BIODEFENSE OPERATIONS LANSING *(FORMERLY BIOPORT CORP)* |
| MSD | MERCK & CO., INC. |
| NAB | NABI *(FORMERLY NORTH AMERICAN BIOLOGICALS, INC.)* |
| NAV | NORTH AMERICAN VACCINE, INC. [INACTIVE--USE BAH] |
| NOV | NOVARTIS PHARMACEUTICAL CORPORATION *(INCLUDES CHIRON, POWDERJECT PHARMACEUTICALS, CELLTECH MEDEVA VACCINES AND EVANS LIMITED, CIBA-GEIGY LIMITED AND SANDOZ LIMITED)* |
| NVX | NOVAVAX, INC. |
| NYB | NEW YORK BLOOD CENTER |
| ORT | ORTHO-CLINICAL DIAGNOSTICS *(FORMERLY ORTHO DIAGNOSTIC SYSTEMS, INC.)* |
| OTC | ORGANON TEKNIKA CORPORATION |
| OTH | OTHER MANUFACTURER |
| PD | PARKEDALE PHARMACEUTICALS (INACTIVE, FORMERLY PARKE-DAVIS) |
| PFR | PFIZER, INC INCL WYETH-LEDERLE, WYETH LABS, LEDERLE LABS, & PRAXIS BIOLOGICS |
| PMC | SANOFI PASTEUR *(FORMERLY AVENTIS PASTEUR, PASTEUR MERIEUX CONNAUGHT; INCLUDES CONNAUGHT LABORATORIES AND PASTEUR MERIEUX)* |
| PRX | PRAXIS BIOLOGICS [BECAME PART OF WAL, NOW OWNED BY PFIZER *(PFR)]* |
| PWJ | POWDERJECT PHARMACEUTICALS (INCLUDES CELLTECH MEDEVA VACCINES AND EVANS MEDICAL LIMITED) [INACTIVE--USE NOV] |
| SCL | SCLAVO, INC. |
| SI | SWISS SERUM AND VACCINE INST. [INACTIVE--USE BPC] |
| SKB | GLAXOSMITHKLINE *(FORMERLY SMITHKLINE BEECHAM; INCLUDES SMITHKLINE BEECHAM AND GLAXO WELLCOME)* |
| SOL | SOLVAY PHARMACEUTICALS (INACTIVE, PART OF ABBOTT) |
| TAL | *TALECRIS BIOTHERAPEUTICS *(INCLUDES BAYER BIOLOGICALS)* |
| UNK | UNKNOWN MANUFACTURER |
| USA | UNITED STATES ARMY MEDICAL RESEARCH AND MATERIAL COMMAND |
| VXG | VAXGEN (INACTIVE, ACQUIRED BY EMERGENT BIODEFENSE OPS, LANSING, INC |
| WA | WYETH-AYERST [INACTIVE, BECAME WAL, NOW OWNED BY PFIZER (PFR)] |
| WAL | ACQUIRED BY PFIZER *(PFR) 10/15/2009* |
| ZLB | ZLB BEHRING (INACTIVE,ACQUIRED BY CSL) |

## 2.4 Mass/Exceptions

| Step | User Action |
|---|---|
| 1. | Hover over Data Entry, down to Mass, and select Exceptions. The Mass Exceptions Records Data Entry Screen, **Load Exception Data**, will be displayed. |

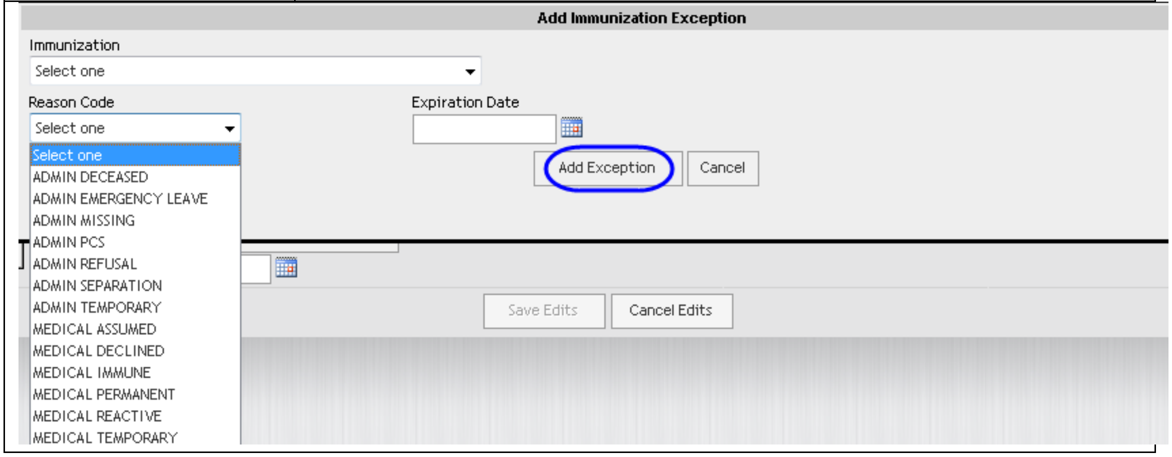

Mass Exceptions Records Data Entry
Load Exception Data
Enter Member SSN
Exceptions Reason Codes Table
Immunization Exceptions
Add
Recalculate All Expiration Dates From:
Save Edits
Cancel Edits

| Action | Immunization Description | Reason Code | Expiration Date |
|---|---|---|---|
| Edit Delete | ANTHRAX | ADMIN SEPARATION | Permanent |
| Edit Delete | ANTHRAX | MEDICAL PERMANENT | Permanent |
| Edit Delete | HEP A, ADULT | ADMIN EMERGENCY LEAVE | 2013/05/17 |
| Edit Delete | HEP B, ADULT | MEDICAL IMMUNE | Permanent |
| Edit Delete | HPV, BIVALENT | MEDICAL TEMPORARY | 2014/04/17 |

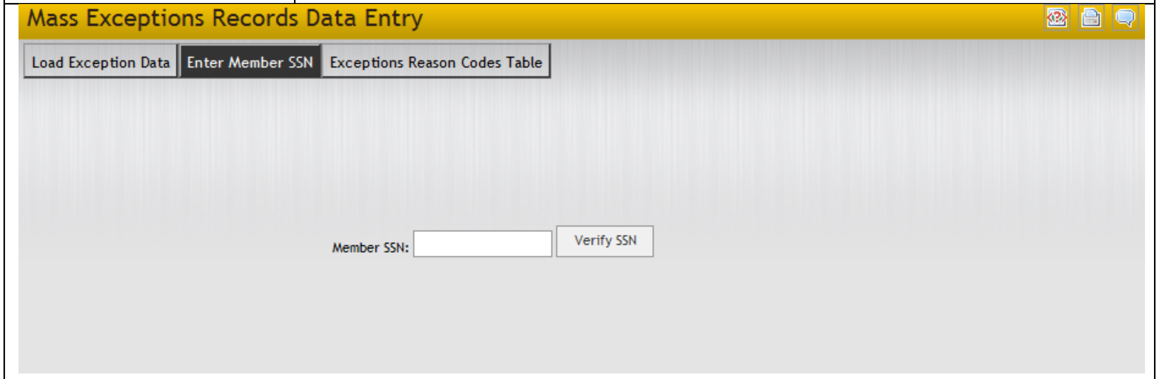
| Step | User Action |
|---|---|
| 2. | To add an Exception, click **Add**. An “Add Immunization Exception” window will be displayed. |
| 3. | Select an immunization from the drop down menu. |
| 4. | Select reason code from the drop down. |

☛ **Note: Reason code list will be unique per immunization chosen.**

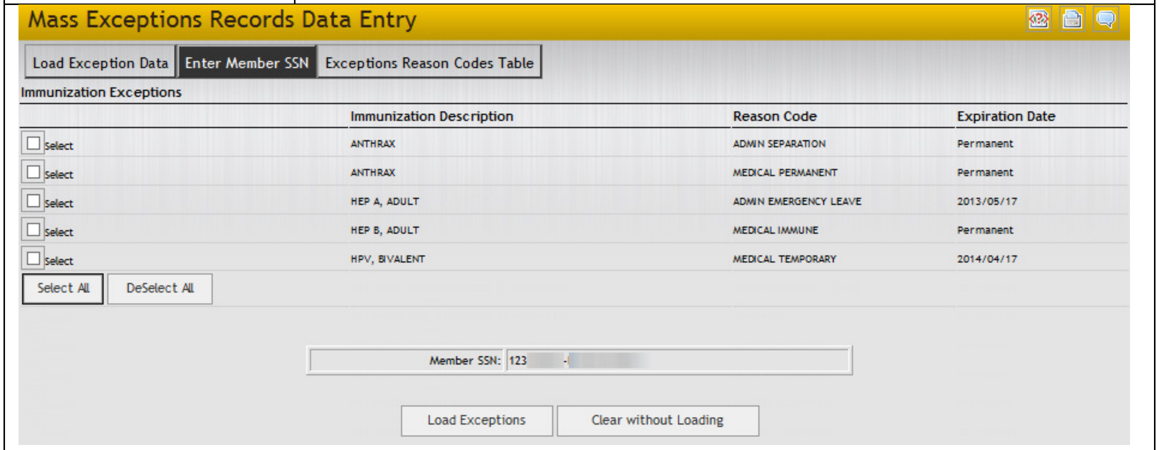
| Step | User Action |
|---|---|
| 5. | Enter the expiration date or select expiration date from calendar. (Note: If permanent exception code selected, expiration date will default to “permanent.” |
| 6. | Click Add Exception. Exception will be added to list above. |


Add Immunization Exception
Immunization
Select one
Reason Code
Select one
Select one
ADMIN DECEASED
ADMIN EMERGENCY LEAVE
ADMIN MISSING
ADMIN PCS
ADMIN REFUSAL
ADMIN SEPARATION
ADMIN TEMPORARY
MEDICAL ASSUMED
MEDICAL DECLINED
MEDICAL IMMUNE
MEDICAL PERMANENT
MEDICAL REACTIVE
MEDICAL TEMPORARY
Expiration Date
Add Exception
Cancel
Save Edits
Cancel Edits

| Step | User Action |
|---|---|
| 7. | Click **Enter Member SSN** and enter SSN of Soldier for verification. |


Mass Exceptions Records Data Entry
Load Exception Data
Enter Member SSN
Exceptions Reason Codes Table
Member SSN:
Verify SSN

| Step | User Action |
|---|---|
| 8. | Click Verify SSN. |
| 9. | Select the exceptions you want added to Soldier's record and click **Load Exceptions**. |


Mass Exceptions Records Data Entry
Load Exception Data
Enter Member SSN
Exceptions Reason Codes Table

Immunization Exceptions

| | Immunization Description | Reason Code | Expiration Date |
|---|---|---|---|
| ☐ Select | ANTHRAX | ADMIN SEPARATION | Permanent |
| ☐ Select | ANTHRAX | MEDICAL PERMANENT | Permanent |
| ☐ Select | HEP A, ADULT | ADMIN EMERGENCY LEAVE | 2013/05/17 |
| ☐ Select | HEP B, ADULT | MEDICAL IMMUNE | Permanent |
| ☐ Select | HPV, BIVALENT | MEDICAL TEMPORARY | 2014/04/17 |

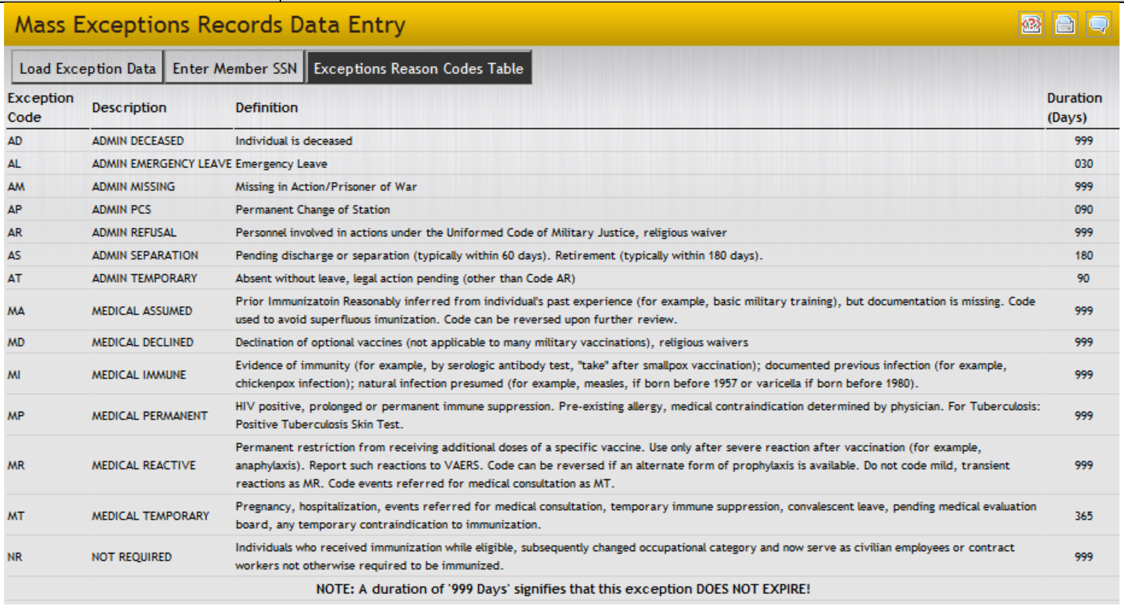
Select All
DeSelect All

Member SSN: 123[redacted]

Load Exceptions
Clear without Loading

| Step | User Action |
|---|---|
| 10. | Click **Exception Reason Codes Table**. |

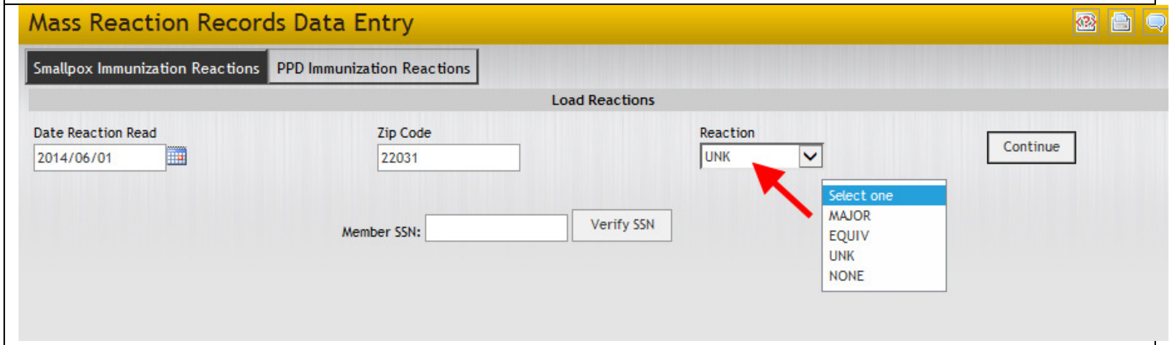
| Step | User Action |
|---|---|

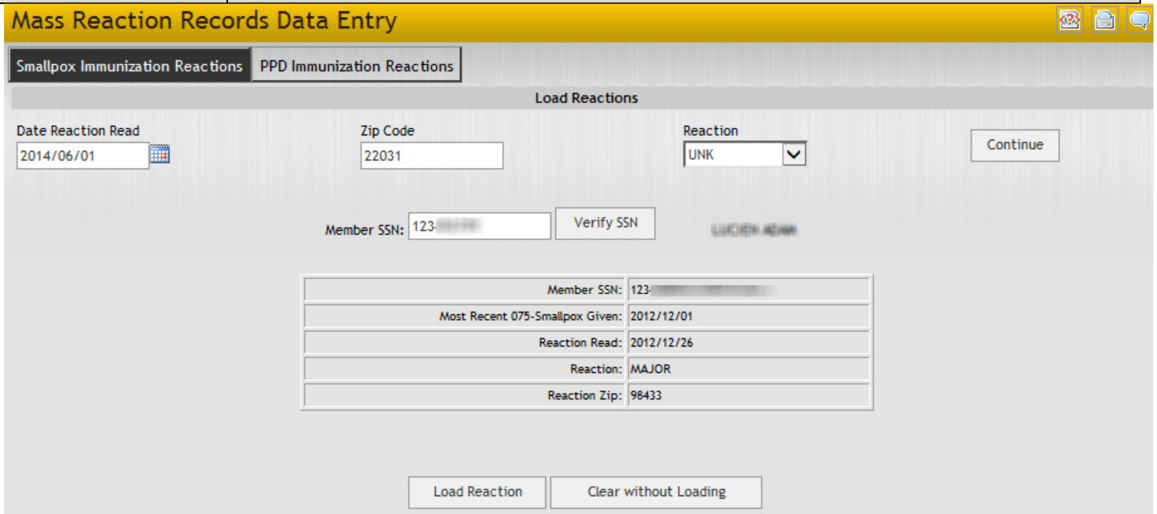
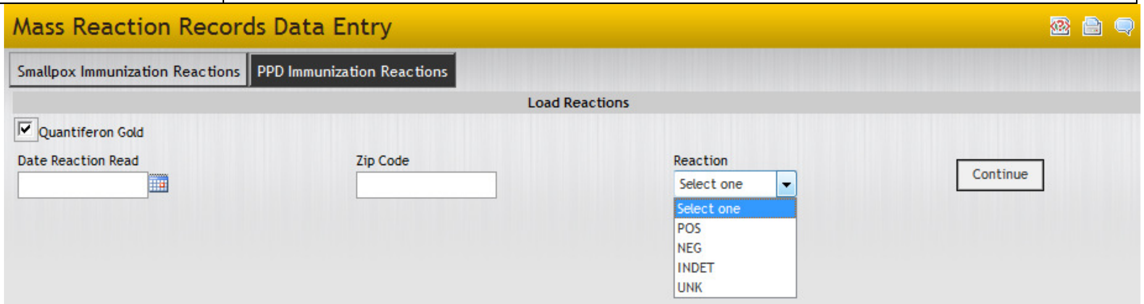
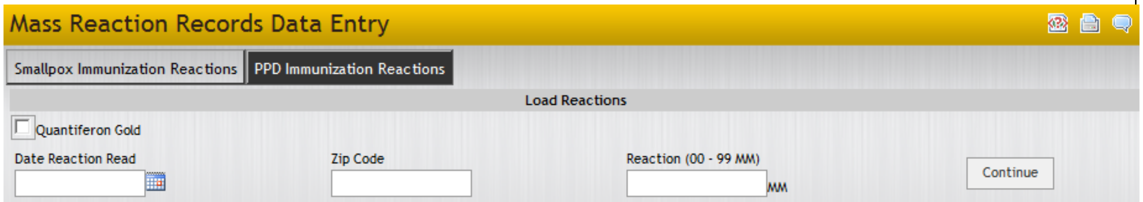

Mass Exceptions Records Data Entry
Load Exception Data
Enter Member SSN
Exceptions Reason Codes Table

| Exception Code | Description | Definition | Duration (Days) |
|---|---|---|---|
| AD | ADMIN DECEASED | Individual is deceased | 999 |
| AL | ADMIN EMERGENCY LEAVE | Emergency Leave | 030 |
| AM | ADMIN MISSING | Missing in Action/Prisoner of War | 999 |
| AP | ADMIN PCS | Permanent Change of Station | 090 |
| AR | ADMIN REFUSAL | Personnel involved in actions under the Uniformed Code of Military Justice, religious waiver | 999 |
| AS | ADMIN SEPARATION | Pending discharge or separation (typically within 60 days). Retirement (typically within 180 days). | 180 |
| AT | ADMIN TEMPORARY | Absent without leave, legal action pending (other than Code AR) | 90 |
| MA | MEDICAL ASSUMED | Prior Immunizatoin Reasonably inferred from individual's past experience (for example, basic military training), but documentation is missing. Code used to avoid superfluous imunization. Code can be reversed upon further review. | 999 |
| MD | MEDICAL DECLINED | Declination of optional vaccines (not applicable to many military vaccinations), religious waivers | 999 |
| MI | MEDICAL IMMUNE | Evidence of immunity (for example, by serologic antibody test, "take" after smallpox vaccination); documented previous infection (for example, chickenpox infection); natural infection presumed (for example, measles, if born before 1957 or varicella if born before 1980). | 999 |
| MP | MEDICAL PERMANENT | HIV positive, prolonged or permanent immune suppression. Pre-existing allergy, medical contraindication determined by physician. For Tuberculosis: Positive Tuberculosis Skin Test. | 999 |
| MR | MEDICAL REACTIVE | Permanent restriction from receiving additional doses of a specific vaccine. Use only after severe reaction after vaccination (for example, anaphylaxis). Report such reactions to VAERS. Code can be reversed if an alternate form of prophylaxis is available. Do not code mild, transient reactions as MR. Code events referred for medical consultation as MT. | 999 |
| MT | MEDICAL TEMPORARY | Pregnancy, hospitalization, events referred for medical consultation, temporary immune suppression, convalescent leave, pending medical evaluation board, any temporary contraindication to immunization. | 365 |
| NR | NOT REQUIRED | Individuals who received immunization while eligible, subsequently changed occupational category and now serve as civilian employees or contract workers not otherwise required to be immunized. | 999 |

NOTE: A duration of '999 Days' signifies that this exception DOES NOT EXPIRE!

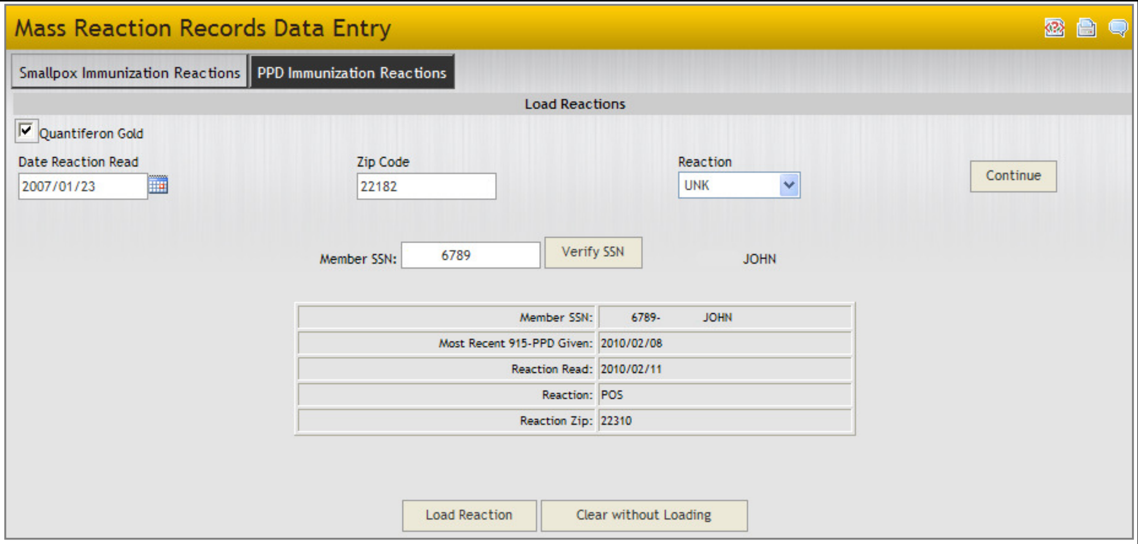
## 2.5 Mass/Reactions

<table>
<tr><th>Step</th><th>User Action</th></tr>
<tr><td>1.</td><td>Hover over Data Entry, down to Mass, and select Reactions.</td></tr>
<tr><td colspan="2"><b>Note: The default screen is for mass update of Smallpox reaction, you can change to PPD (Tuberculosis testing) by clicking on the PPD Immunization Reaction tab at top of screen.</b></td></tr>
<tr><td colspan="2">
Mass Reaction Records Data Entry
Smallpox Immunization Reactions
PPD Immunization Reactions
Load Reactions
Continue
Verify SSN
Select one
MAJOR
EQUIV
UNK
NONE
Date Reaction Read: 2014/06/01<br>Zip Code: 22031<br>Reaction: UNK<br>Member SSN:</td></tr>
<tr><td>2.</td><td>Enter the date the reaction was read or select it from calendar.</td></tr>
<tr><td>3.</td><td>Enter the Zip code where the reaction was read.</td></tr>
<tr><td>4.</td><td>Select the type of reaction from the drop down menu.</td></tr>
<tr><td colspan="2"><b>Note: Smallpox reactions have dropdown for Major, Equiv, Unk, or None – but you must manually type the PPD read reactions in 00-99mm format.</b></td></tr>
<tr><td>5.</td><td>Click Continue.</td></tr>
<tr><td>6.</td><td>Enter Service Member’s SSN.</td></tr>
<tr><td>7.</td><td>Click <b>Verify SSN</b> to display reaction information.</td></tr>
<tr><td colspan="2"><b>Note: If the Smallpox being read is not documented on this screen, you must first load that information into system, then come back and load the reaction data.</b></td></tr>
</table>

| Step | User Action |
|---|---|
| | <br>Mass Reaction Records Data Entry<br>Load Reactions<br>Date Reaction Read: 2014/06/01<br>Zip Code: 22031<br>Reaction: UNK<br>Member SSN: 123[redacted]<br>[redacted]<br>Member SSN: 123[redacted]<br>Most Recent 075-Smallpox Given: 2012/12/01<br>Reaction Read: 2012/12/26<br>Reaction: MAJOR<br>Reaction Zip: 98433 |
| 8. | Click **Load Reaction** for the reaction information to be loaded to the Service Member's record. |
| 9. | Click **PPD Immunization Reactions**. |
| | <br>Mass Reaction Records Data Entry<br>Load Reactions<br>☑ Quantiferon Gold<br>Date Reaction Read:<br>Zip Code:<br>Reaction: Select one<br>Select one<br>POS<br>NEG<br>INDET<br>UNK<br>**OR**<br><br>Mass Reaction Records Data Entry<br>Load Reactions<br>☐ Quantiferon Gold<br>Date Reaction Read:<br>Zip Code:<br>Reaction (00 - 99 MM): MM |
| 10. | Check Quantiferon Gold box if that lab test was given in lieu of the PPD placement. |
| 11. | Enter date when lab test or reaction was read. |
| 12. | Enter zip code it was read. |
| 13. | Select the reaction from dropdown (if Quantiferon selected) or type the reaction size for PPD reads (00-99). |

| Step | User Action |
|---|---|
| 14. | Click Continue. |
| 15. | Enter SSN of first Service Member to be updated with this reaction. |
| 16. | Click Verify SSN. PPD Immunization reaction will be loaded. |

☛ **Note: If the Quantiferon or PPD being read is not documented on this screen, you must first load that information into system, then come back and load the reaction data.**


Mass Reaction Records Data Entry
Smallpox Immunization Reactions
PPD Immunization Reactions
Load Reactions
Continue
Verify SSN
Load Reaction
Clear without Loading

☑ Quantiferon Gold

Date Reaction Read: 2007/01/23

Zip Code: 22182

Reaction: UNK

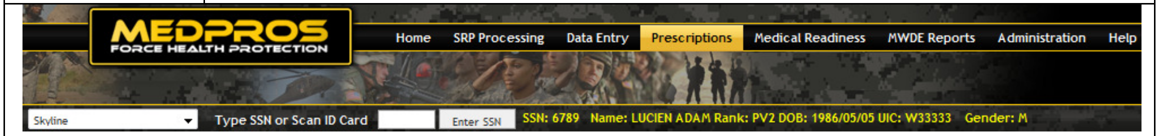
Member SSN: 6789 JOHN

| | |
|---|---|
| Member SSN: | 6789- JOHN |
| Most Recent 915-PPD Given: | 2010/02/08 |
| Reaction Read: | 2010/02/11 |
| Reaction: | POS |
| Reaction Zip: | 22310 |

| | |
|---|---|
| 17. | Click Load Reaction. Reaction information will be loaded to Service Member’s record. (Repeat items 15-17 as necessary to record all Soldiers whose reaction matches these values). |

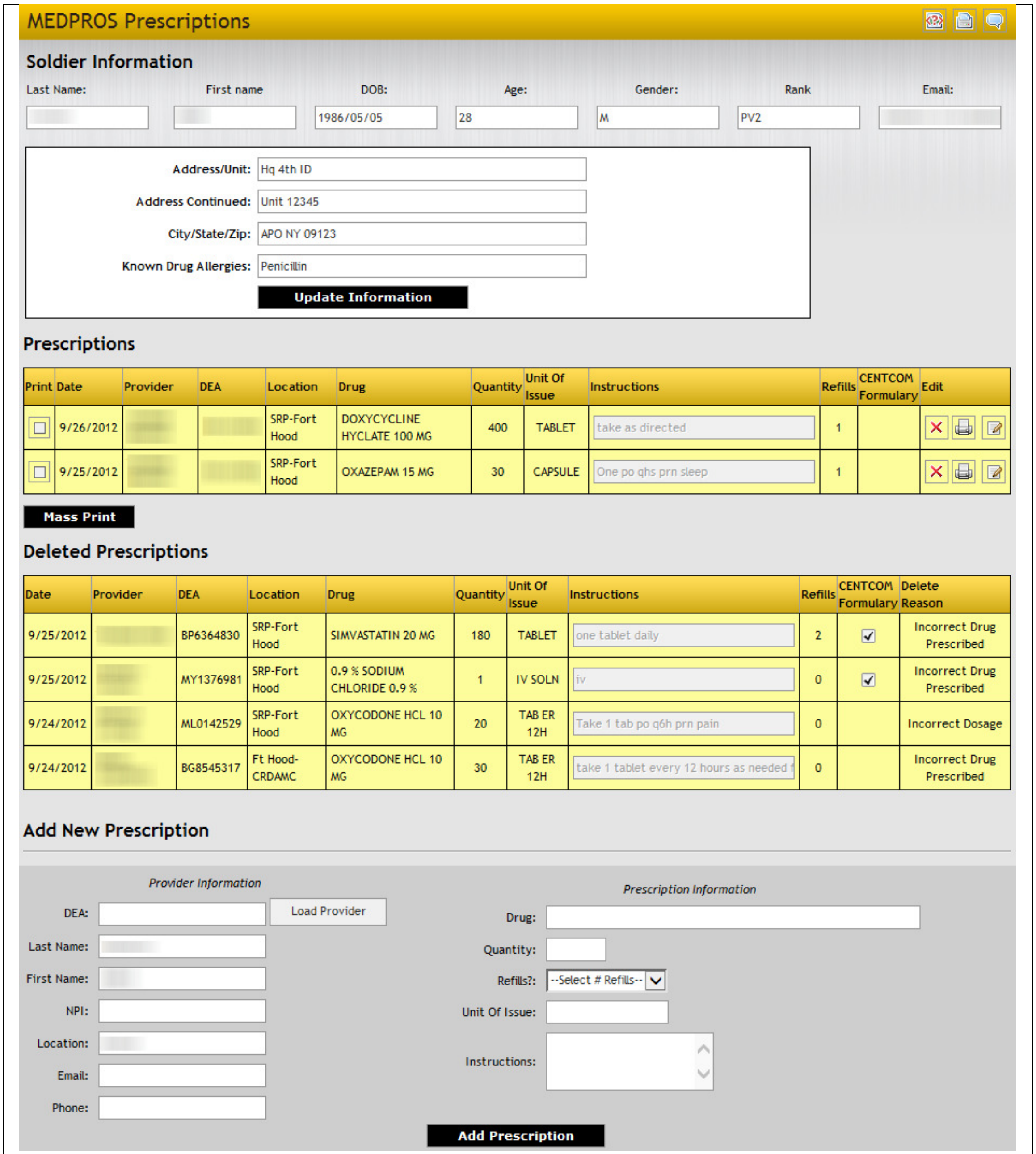
## 3.0 Prescriptions

| Step | User Action |
|---|---|
| 1. | Enter Soldier SSN and click **Enter SSN**. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
Skyline
Type SSN or Scan ID Card
Enter SSN

SSN: 6789 Name: LUCIEN ADAM Rank: PV2 DOB: 1986/05/05 UIC: W33333 Gender: M

| | |
|---|---|
| 2. | Click **Prescriptions** from top menu. |
| 3. | Complete boxes for Unit Address, City, State, Zip (where prescription is to be mailed) and Allergy information and click "Update Address". *Email address also required prior to saving updates*. |
| 4. | Enter Provider Information and Prescription Information to add a new prescription. (**NOTE**: DEA and NPI Numbers must be in proper format) – Click **Add Prescription**. |



**MEDPROS Prescriptions**

**Soldier Information**

| Last Name: | First name | DOB: | Age: | Gender: | Rank | Email: |
|---|---|---|---|---|---|---|
| [redacted] | [redacted] | 1986/05/05 | 28 | M | PV2 | [redacted] |

Address/Unit: Hq 4th ID
Address Continued: Unit 12345
City/State/Zip: APO NY 09123
Known Drug Allergies: Penicillin

**Prescriptions**

| Print | Date | Provider | DEA | Location | Drug | Quantity | Unit Of Issue | Instructions | Refills | CENTCOM Formulary | Edit |
|---|---|---|---|---|---|---|---|---|---|---|---|
| ☐ | 9/26/2012 | [redacted] | [redacted] | SRP-Fort Hood | DOXYCYCLINE HYCLATE 100 MG | 400 | TABLET | take as directed | 1 |  | ✕ 🖶 ✎ |
| ☐ | 9/25/2012 | [redacted] | [redacted] | SRP-Fort Hood | OXAZEPAM 15 MG | 30 | CAPSULE | One po qhs prn sleep | 1 |  | ✕ 🖶 ✎ |

**Deleted Prescriptions**

| Date | Provider | DEA | Location | Drug | Quantity | Unit Of Issue | Instructions | Refills | CENTCOM Formulary | Delete Reason |
|---|---|---|---|---|---|---|---|---|---|---|
| 9/25/2012 | [redacted] | BP6364830 | SRP-Fort Hood | SIMVASTATIN 20 MG | 180 | TABLET | one tablet daily | 2 | ☑ | Incorrect Drug Prescribed |
| 9/25/2012 | [redacted] | MY1376981 | SRP-Fort Hood | 0.9 % SODIUM CHLORIDE 0.9 % | 1 | IV SOLN | iv | 0 | ☑ | Incorrect Drug Prescribed |
| 9/24/2012 | [redacted] | ML0142529 | SRP-Fort Hood | OXYCODONE HCL 10 MG | 20 | TAB ER 12H | Take 1 tab po q6h prn pain | 0 |  | Incorrect Dosage |
| 9/24/2012 | [redacted] | BG8545317 | Ft Hood-CRDAMC | OXYCODONE HCL 10 MG | 30 | TAB ER 12H | take 1 tablet every 12 hours as needed f | 0 |  | Incorrect Drug Prescribed |

**Add New Prescription**

*Provider Information*

DEA:
Last Name: [redacted]
First Name: [redacted]
NPI:
Location: [redacted]
Email:
Phone:

*Prescription Information*

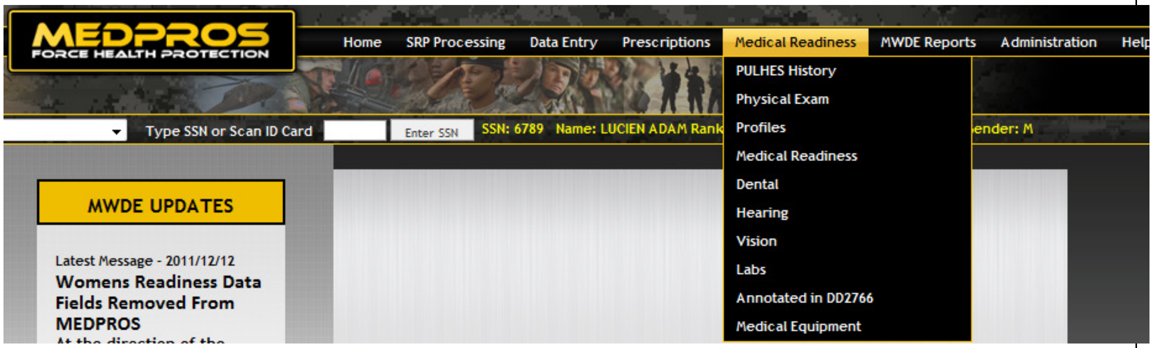
Drug:
Quantity:
Refills?: --Select # Refills--
Unit Of Issue:
Instructions:

|  |  |
|---|---|
| 4. | Click Add Prescription. |

# 4.0 Medical Readiness

## 4.1 PULHES History

| Step | What to do |
|---|---|
| 1. | Select Location from the drop down menu. |
| 2. | Enter SSN of Soldier. |
| 3. | Hover over Medical Readiness and select PULHES History. (Read only, no updates from the screen.) |

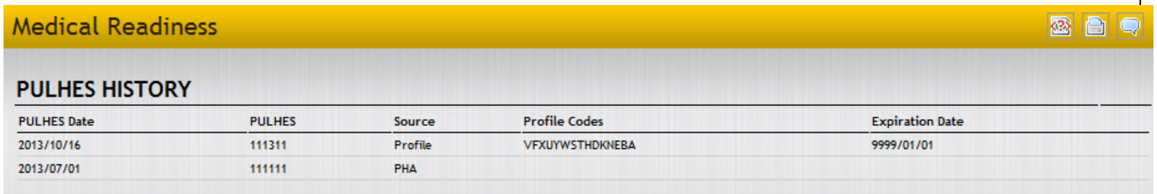

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
PULHES History
Physical Exam
Profiles
Medical Readiness
Dental
Hearing
Vision
Labs
Annotated in DD2766
Medical Equipment
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

SSN: 6789 Name: LUCIEN ADAM Rank ender: M

Latest Message - 2011/12/12

**Womens Readiness Data Fields Removed From MEDPROS**

| Step | What to do |
|---|---|
| 4. | View the PULHES history. |

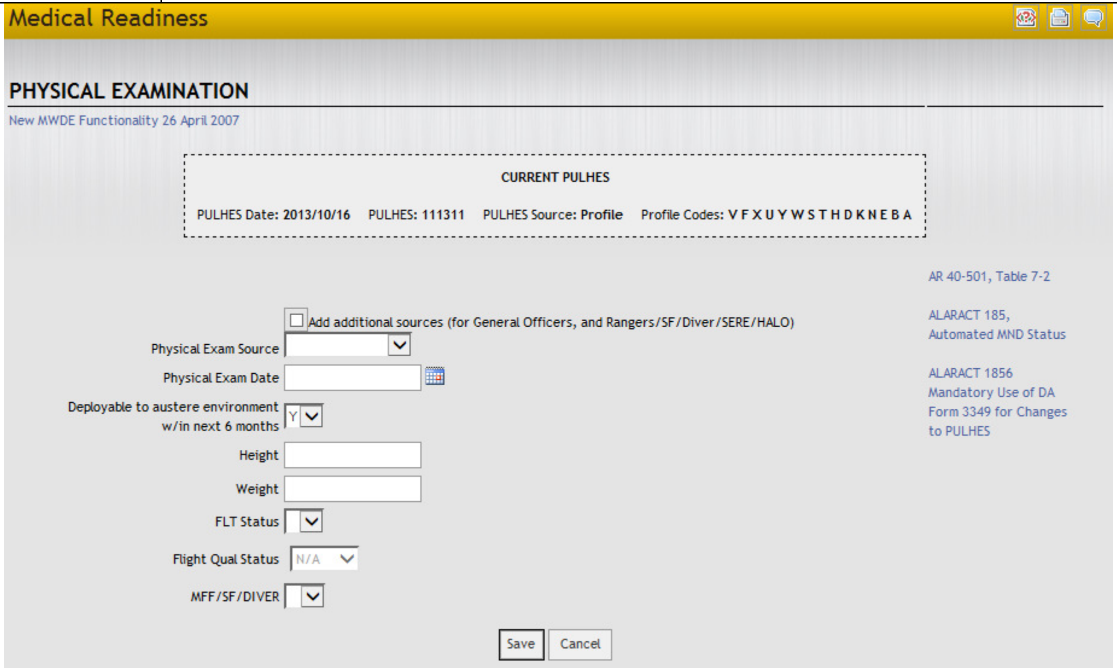

Medical Readiness

**PULHES HISTORY**

| PULHES Date | PULHES | Source | Profile Codes | Expiration Date |
|---|---|---|---|---|
| 2013/10/16 | 111311 | Profile | VFXUYWSTHDKNEBA | 9999/01/01 |
| 2013/07/01 | 111111 | PHA | | |

## 4.2 Physical Exam

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Physical Exam. (PULHES can only be updated in the eProfile application.) |



Medical Readiness

PHYSICAL EXAMINATION

New MWDE Functionality 26 April 2007

CURRENT PULHES

PULHES Date: **2013/10/16** PULHES: **111311** PULHES Source: **Profile** Profile Codes: **V F X U Y W S T H D K N E B A**

AR 40-501, Table 7-2

ALARACT 185, Automated MND Status

ALARACT 1856 Mandatory Use of DA Form 3349 for Changes to PULHES

☐ Add additional sources (for General Officers, and Rangers/SF/Diver/SERE/HALO)

Physical Exam Source:

Physical Exam Date:

Deployable to austere environment w/in next 6 months: Y

Height:

Weight:

FLT Status:

Flight Qual Status: N/A

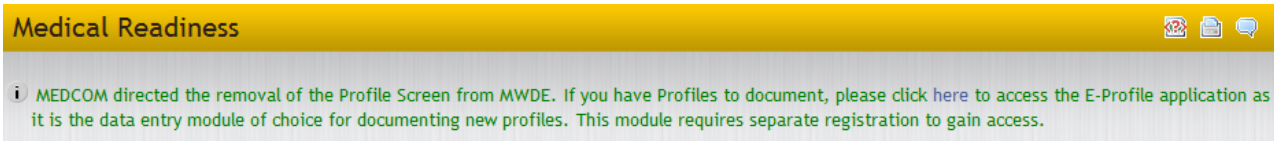
MFF/SF/DIVER:

| Step | What to do |
|---|---|
| 2. | Check the box if you want to add additional sources (for General Officers, Aviators, and Rangers/SF/Diver/SERE/HALO) |
| 3. | Select the Physical Exam Source from the drop down. |
| 4. | Enter the date the physical exam was done. |
| 5. | Select Yes or No if Soldier is deployable to an austere environment within the next 6 months. |
| 6. | Enter Height of the Soldier. |
| 7. | Enter Weight of the Soldier. |
| 8. | Select Yes or No for the FLT Status to indicate Soldiers who are on active flight status. |
| 9. | Select the MFF (Military Free Fall)/SF (Special Forces)/Diver from the drop down if applicable, otherwise leave blank. |

**Note: To view the Profile Codes and what they mean, click on the link AR 40-501, Table 7-2.**

| Step | What to do |
|---|---|
| 10. | Click **Save** for the physical examination information to be updated. |

## 4.3 Profiles

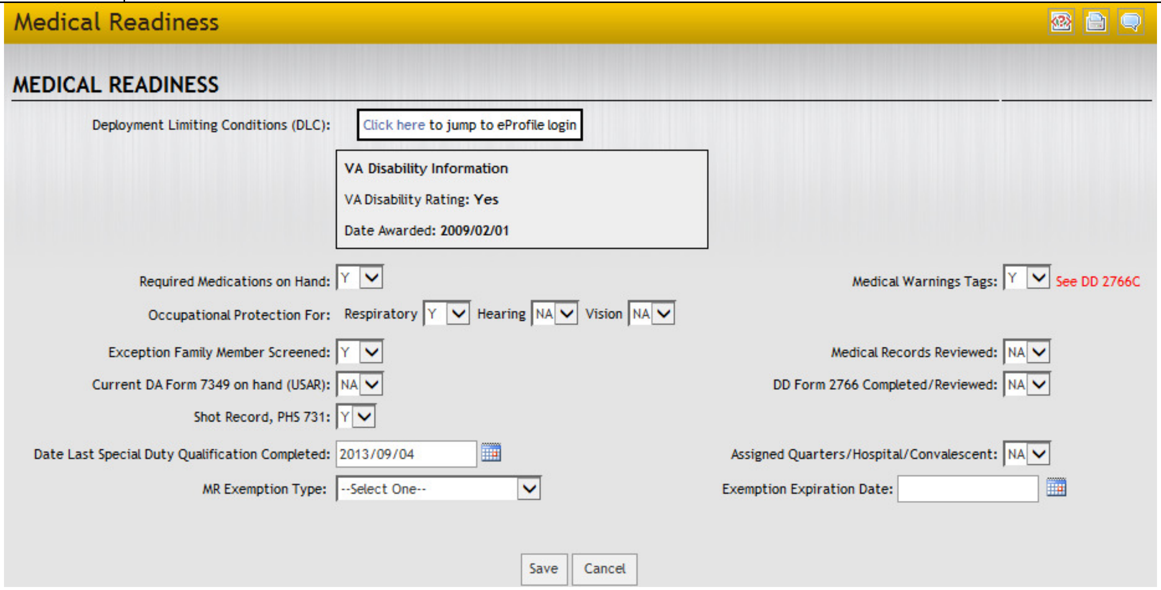


Medical Readiness

MEDCOM directed the removal of the Profile Screen from MWDE. If you have Profiles to document, please click here to access the E-Profile application as it is the data entry module of choice for documenting new profiles. This module requires separate registration to gain access.

## 4.4 Medical Readiness

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Medical Readiness. |



Medical Readiness

MEDICAL READINESS

Deployment Limiting Conditions (DLC): Click here to jump to eProfile login

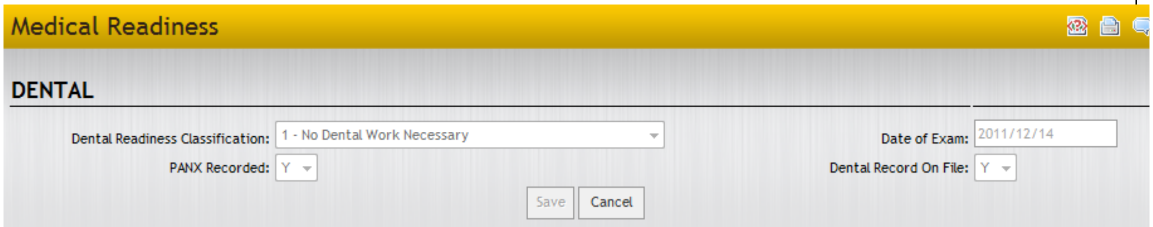
VA Disability Information
VA Disability Rating: Yes
Date Awarded: 2009/02/01

Required Medications on Hand: Y
Medical Warnings Tags: Y See DD 2766C
Occupational Protection For: Respiratory Y Hearing NA Vision NA
Exception Family Member Screened: Y
Medical Records Reviewed: NA
Current DA Form 7349 on hand (USAR): NA
DD Form 2766 Completed/Reviewed: NA
Shot Record, PHS 731: Y
Date Last Special Duty Qualification Completed: 2013/09/04
Assigned Quarters/Hospital/Convalescent: NA
MR Exemption Type: --Select One--
Exemption Expiration Date:

| Step | What to do |
|---|---|
| 2. | Deployment Limiting Condition field – note any Deployment Limiting (DL) conditions: This field is auto populated from eProfile and Pregnancy Status (DL5 only). |
| 3. | VA Disability Rating Information: This boxed information is provided to MEDPROS from the Defense Management Data Center (DMDC) repository and is not editable in MWDE. Those with an approved VA Disability rating will show these fields with a “Yes” along with the date the VA Disability Rating was awarded. |

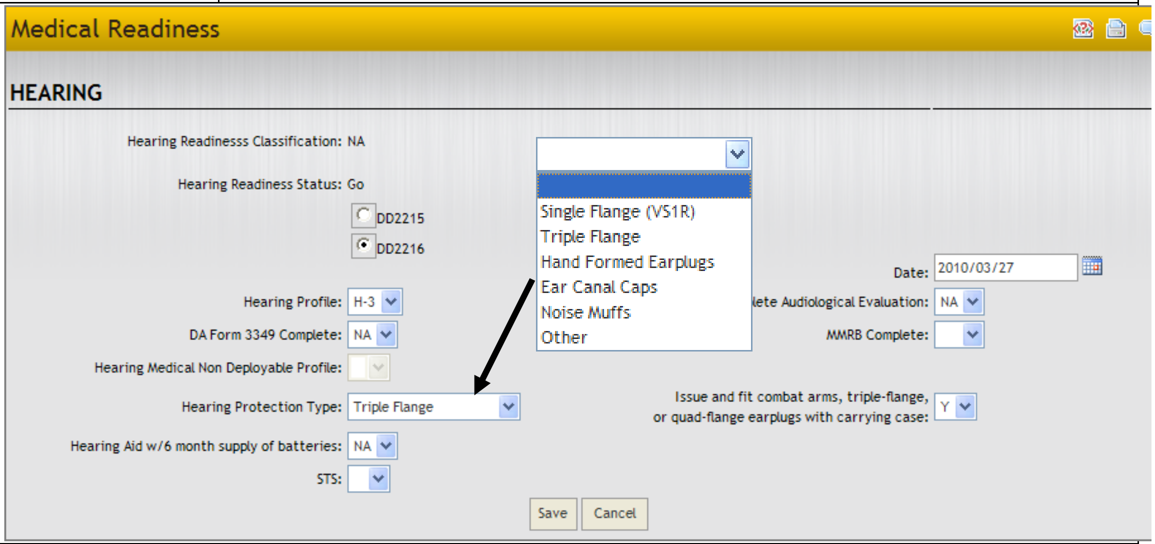
| Step | What to do |
|---|---|
| 4. | If Soldier is deploying, select Yes, No, or NA indicating if the Soldier has required medications on hand (Y), does not have required medications (N), or does not require medications (NA). |
| 5. | Select Yes, No or NA as appropriate if Soldier has occupational protections for Respiratory, Hearing, and Vision. |
| 6. | Select Yes, No or NA as applicable if Soldier has Exception Family Members Screened. |
| 7. | For USAR Soldiers, select Yes, No, or NA if Soldier has current DA Form 7349 on hand. |
| 8. | Select Yes or No if Soldier has their yellow shot record, PHS 731 (printout from MEDPROS is acceptable substitute to PHS 731). |
| 9. | Enter the date of the last annual medical certificate (as applicable for National Guard and Army Reserve Soldiers only). |
| 10. | Select Yes, No or NA as applicable if Soldier has required Medical Warning tags. |
| 11. | Select Yes, No or NA as applicable if Soldier's medical records have been reviewed. |
| 12. | Select Yes, No or NA as applicable if Soldier's DD Form 2766 has been completed/reviewed. |
| 13. | Select Yes, No or NA as applicable if Soldier has assigned Quarters/Hospital/Convalescent. |
| ☛ **Note: Women's Readiness will be displayed for female Service Members.** | |
| 14. | Select, Yes, No, NA or Exempt from the pregnant drop down menu. |
| 15. | Enter date of pregnancy test. (Routine pregnancy tests are not required for Readiness. Pregnancy test must be performed within 30 days of deployment date. You must enter test date when changing pregnancy status. (NOTE: if female Soldier just had a baby, delivery date may be used in lieu of pregnancy test date) |
| 16. | Enter estimated date of confinement. (NOTE: This is the expected delivery date) |

## 4.5 Dental

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Dental to view the current readiness status. |
| 2. | View the current Dental information for this Soldier. Dental data can only be updated in the Corporate Dental Application (Active Army & activated reservists) or the DENCLASS program (National Guard and Army Reserve Soldiers) |
| <br>Medical Readiness<br>DENTAL<br>Dental Readiness Classification: 1 - No Dental Work Necessary<br>PANX Recorded: Y<br>Date of Exam: 2011/12/14<br>Dental Record On File: Y<br> | |

## 4.6 Hearing

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Hearing to display the readiness for hearing. |
| 2. | Click the radio button corresponding to the form that has been completed. |
| 3. | Select Hearing Profile from the drop down menu. |
| 4. | Select Yes, No or NA if DA Form 3349 has been completed. |
| 5. | Select Hearing Protection Type from the drop down menu. |
| 6. | Select Yes, No or NA as applicable if Soldier has a hearing aid with 6 month supply of batteries. |
| 7. | Select Yes or No as indicated on DD Form 2216 if the STS (Significant Threshold Shift) has changed. |
| 8. | Enter the date of the hearing exam. |
| 9. | Select Yes, No or NA as appropriate if Soldier has had a complete audiological evaluation. |
| 10. | Select Yes, No or NA as applicable if Soldier has an MMRB complete. |
| 11. | Select Yes or No if Soldier has been issued and fit for combat arms, triple-flange, or quad-flange earplugs with carrying case. |



Hearing Readinesss Classification: NA

Hearing Readiness Status: Go

○ DD2215

● DD2216

Hearing Profile: H-3

DA Form 3349 Complete: NA

Hearing Medical Non Deployable Profile:

Hearing Protection Type: Triple Flange

Hearing Aid w/6 month supply of batteries: NA

STS:

Date: 2010/03/27

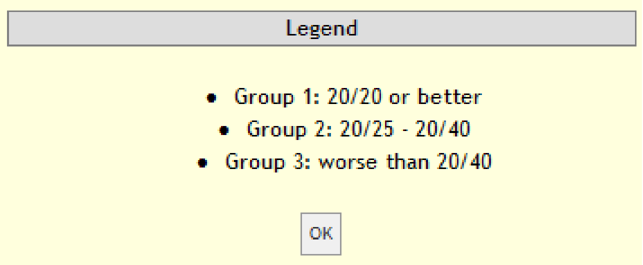
lete Audiological Evaluation: NA

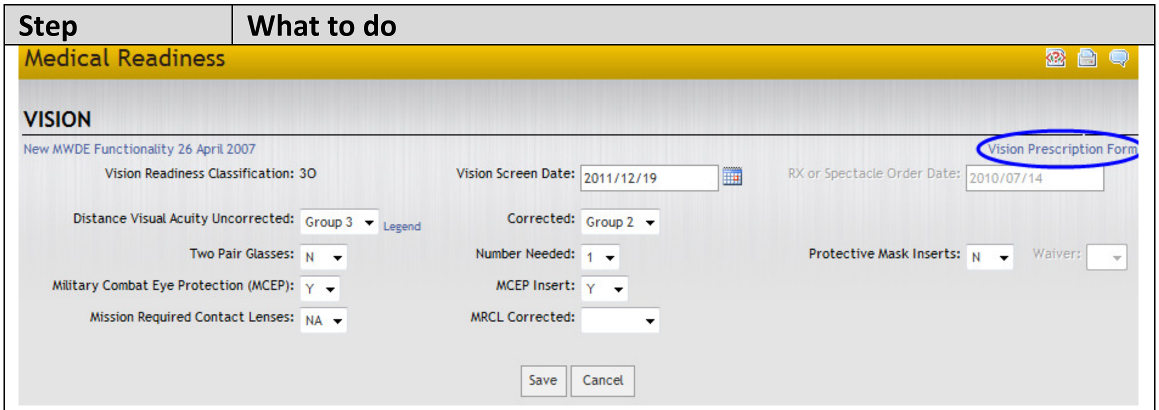
MMRB Complete:

Issue and fit combat arms, triple-flange, or quad-flange earplugs with carrying case: Y

| Step | What to do |
|---|---|
| 12. | Click **Save**. |

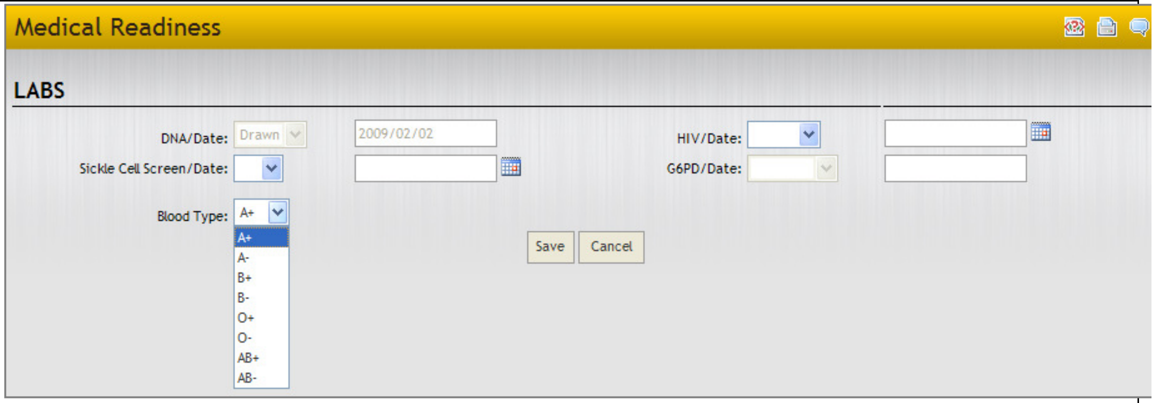
## 4.7 Vision

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Vision. |
| 2. | Enter or select from calendar the Vision Screening Date. |
| 3. | Click Legend to view different groups and the distance of vision. |
| |  Legend<br>• Group 1: 20/20 or better<br>• Group 2: 20/25 - 20/40<br>• Group 3: worse than 20/40<br>OK |
| 4. | Select the distance visual acuity uncorrected group for Soldier from the drop down menu. (If group 1, corrected fields will be muted and not required) |
| 5. | Select the Group number in the Corrected box. (Corrected text box will be enabled if Group 2 or Group 3 is selected in Step 3). |
| 6. | Select Yes, No or NA if two Pairs of Glasses are needed. (This is enabled if Group 2 or Group 3 are chosen for Visual Acuity.) |
| 7. | Select the number of glasses needed from the drop down menu. |
| 8. | Select Yes, No or NA if Soldier needs Protective Mask Inserts. |
| 9. | Select Yes or No if Soldier has Military Combat Eye Protection (MCEP). |
| 10. | Select Yes, No or NA if Soldier has a pair of MCEP Inserts. |
| 11. | Select Yes, No or NA if Soldier has Mission Required Contact Lenses (MRCL). |
| 12. | Select Group number associated with MRCL corrected. (This will be enabled if 'Yes' is chosen in Step 12.) |
| 13. | To view any Vision Prescriptions on file in SRTS for the Soldier, click the Vision Prescription Form. If present in SRTS, prescription will be displayed. If not, message will indicate none are on file in SRTS. |

| Step | What to do | |
|---|---|---|
| | <br>Medical Readiness<br>VISION<br>New MWDE Functionality 26 April 2007<br>Vision Prescription Form<br>Vision Readiness Classification: 3O<br>Vision Screen Date: 2011/12/19<br>RX or Spectacle Order Date: 2010/07/14<br>Distance Visual Acuity Uncorrected: Group 3<br>Legend<br>Corrected: Group 2<br>Two Pair Glasses: N<br>Number Needed: 1<br>Protective Mask Inserts: N<br>Waiver:<br>Military Combat Eye Protection (MCEP): Y<br>MCEP Insert: Y<br>Mission Required Contact Lenses: NA<br>MRCL Corrected:<br>Save<br>Cancel | |
| 14. | Click **Save**. | Vision information will be saved. |

## 4.8 Labs

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Labs. |
| 2. | From the DNA and HIV drop down menus, select the “D” if a new sample was drawn. (only source systems can populate the “Y” entry, indicating on file at central repository)<br>**NOTE**: Drawn entries for HIV and DNA will stay in MEDPROS for 60 days. If confirmation (Yes) is not received from source systems (AFHSC and AFIP respectively), the system will revert back to previous entry. |
| 3. | Enter (or select from the Calendar) the date the DNA or HIV samples were drawn.<br>**NOTE**: Dates cannot be greater than 60 days in the past |
| 4. | Select Yes, No or NA is the Soldier had been screened for Sickle Cell. |
| 5. | Enter the date the Sickle Cell screen was done. |
| 6. | Select Normal or Deficient for the Soldier’s G6PD test results. |
| 7. | Enter the date G6PD test was performed. |
| 8. | Select the Soldier’s blood type from the dropdown menu. This should only be recorded from a lab slip or entry level physical exam, not from ID card or dog tags. |

| Step | What to do | |
|---|---|---|
| |  | |
| 9. | Click **Save**. | Lab information will be saved. |

Medical Readiness

LABS

DNA/Date: Drawn 2009/02/02

Sickle Cell Screen/Date:

HIV/Date:

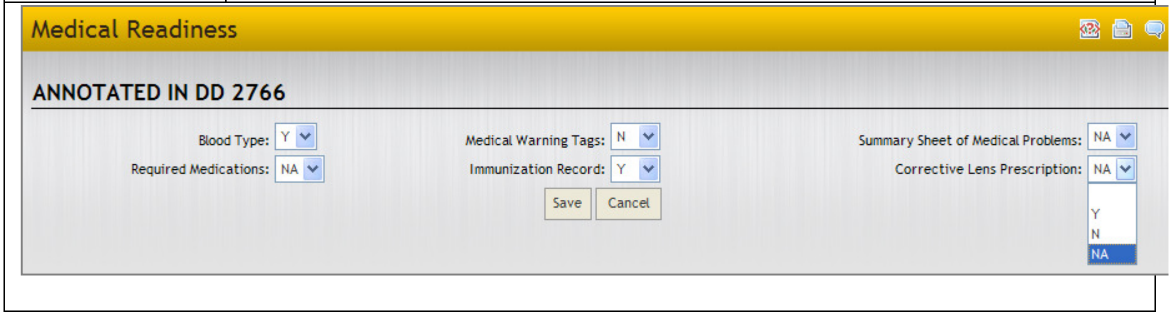
G6PD/Date:

Blood Type: A+

A+
A-
B+
B-
O+
O-
AB+
AB-
Save
Cancel

## 4.9 Annotated in DD2766

| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Annotated in DD2766. |
| 2. | Select Yes or No from dropdown to indicate if Soldier's Blood Type is documented on their DD2766 |
| 3. | Select Yes, No or NA to indicate if Soldiers with a requirement for Medical Warning Tags have them documented on their DD Form 2766. |
| 4. | Select Yes, No or NA if Soldier has a Summary Sheet of any existing Medical Problems documented on their DD Form 2766. |
| 5. | Select Yes, No or NA if Soldier has their Required Medications documented on their DD Form 2766. |
| 6. | Select Yes, No or NA if Soldier has their Immunizations documented on their DD Form 2766. |
| 7. | Select Yes, No or NA if Soldier has their Corrective Lens Prescription. |
| 8. | Click **Save**. |


Medical Readiness

ANNOTATED IN DD 2766

Blood Type: Y

Required Medications: NA

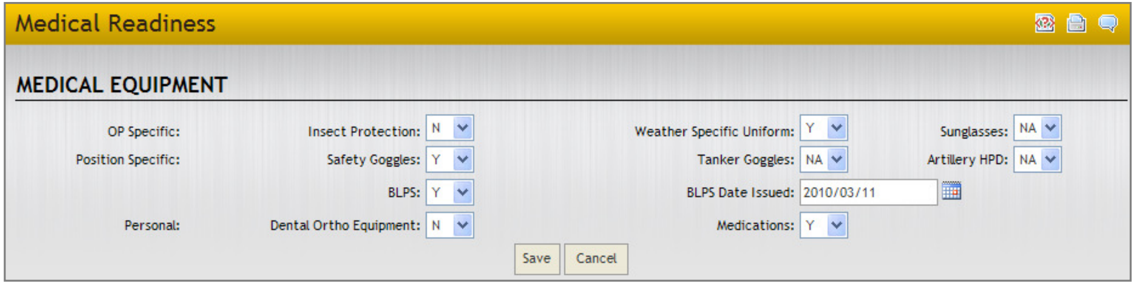
Medical Warning Tags: N

Immunization Record: Y

Summary Sheet of Medical Problems: NA

Corrective Lens Prescription: NA

## 4.10 Medical Equipment

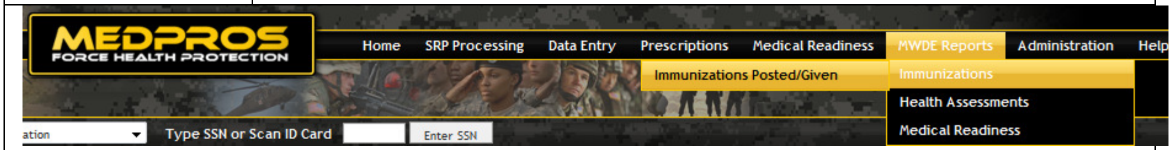
| Step | What to do |
|---|---|
| 1. | Hover over Medical Readiness and select Medical Equipment. |
| 2. | Select Yes, No or NA if Soldier has any required Insect Protection. |
| 3. | Select Yes, No or NA if Soldier has a required Weather Specific Uniform. |
| 4. | Select Yes, No or NA if Soldier has required Sunglasses. |
| 5. | Select Yes, No or NA if Soldier has required Safety Goggles. |
| 6. | Select Yes, No or NA if Soldier has required Tanker Goggles. |
| 7. | Select Yes, No or NA if Soldier has required Artillery HPD. |
| 8. | Select Yes, No or NA if Soldier has required BLPS. |
| 9. | Enter the date the BLPS was issued. |
| 10. | Select Yes, No or NA if Soldier has required Dental Ortho Equipment. |
| 11. | Select Yes, No or NA if Soldier has required personal Medications. |
| <br>Medical Readiness<br>MEDICAL EQUIPMENT<br>OP Specific:<br>Insect Protection: N<br>Weather Specific Uniform: Y<br>Sunglasses: NA<br>Position Specific:<br>Safety Goggles: Y<br>Tanker Goggles: NA<br>Artillery HPD: NA<br>BLPS: Y<br>BLPS Date Issued: 2010/03/11<br>Personal:<br>Dental Ortho Equipment: N<br>Medications: Y<br> | |
| 12. | Click **Save**. |

# 5.0 MWDE Reports

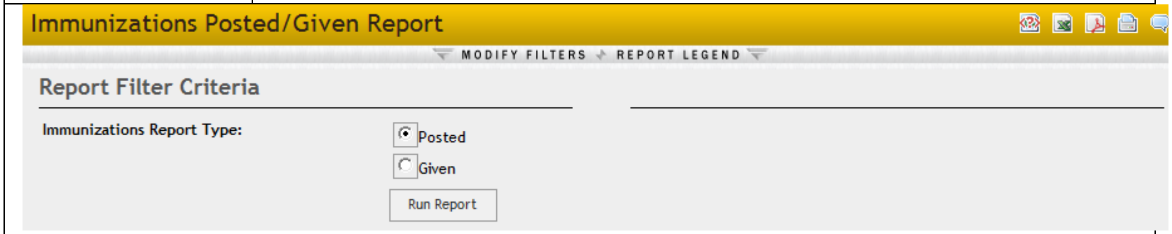
## 5.1 Immunizations

### 5.1.1 Immunizations Posted/Given

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Immunizations, and select Immunizations Posted/Given. |

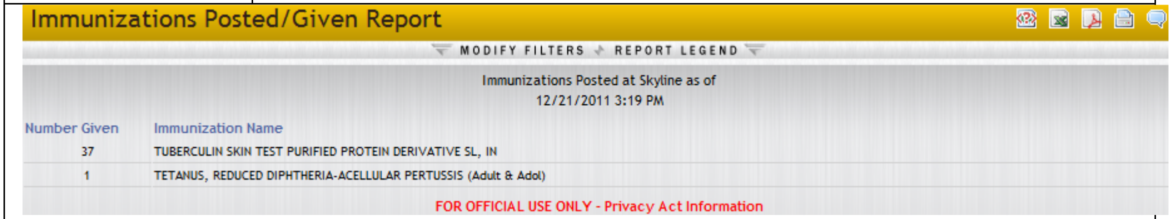

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help
Immunizations Posted/Given
Immunizations
Health Assessments
Medical Readiness
ation
Type SSN or Scan ID Card
Enter SSN

| Step | What to do |
|---|---|
| 2. | Select the either the Posted or Given radio button. |


Immunizations Posted/Given Report
MODIFY FILTERS
REPORT LEGEND
Report Filter Criteria
Run Report

Immunizations Report Type: ● Posted ○ Given

| Step | What to do |
|---|---|
| 3. | Click “Run Report” to view Immunizations Posted/Given Report. Immunizations Posted or Given at selected location will be listed. |


Immunizations Posted/Given Report
MODIFY FILTERS
REPORT LEGEND

Immunizations Posted at Skyline as of
12/21/2011 3:19 PM

| Number Given | Immunization Name |
|---|---|
| 37 | TUBERCULIN SKIN TEST PURIFIED PROTEIN DERIVATIVE SL, IN |
| 1 | TETANUS, REDUCED DIPHTHERIA-ACELLULAR PERTUSSIS (Adult & Adol) |

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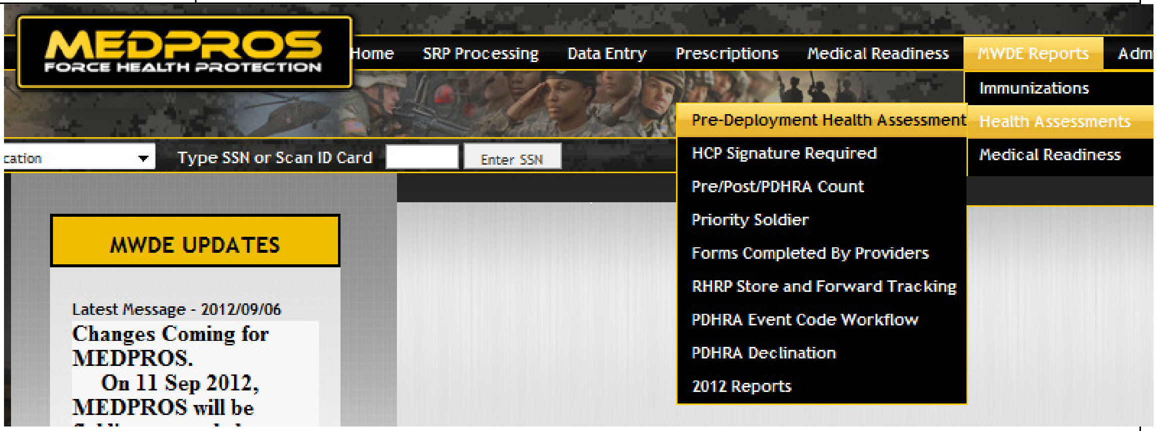
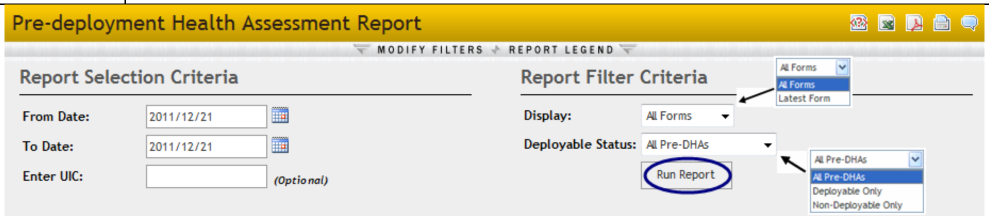
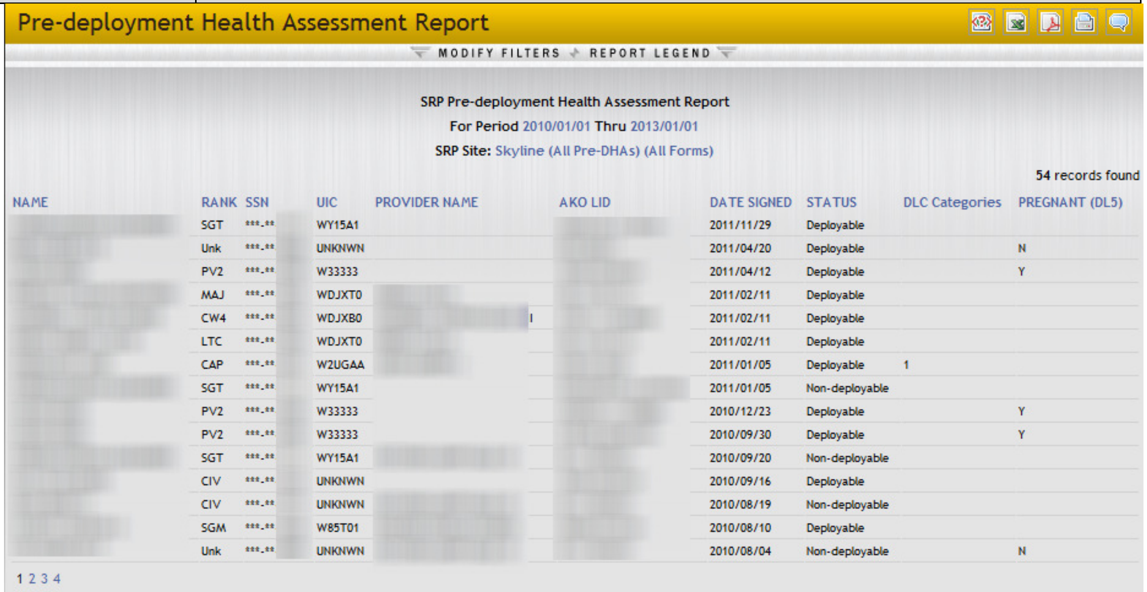
## 5.2 Health Assessments

### 5.2.1 Pre-Deployment Health Assessment

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, and select Pre-Deployment Health Assessments. |
|  |  MEDPROS<br>FORCE HEALTH PROTECTION<br>Home<br>SRP Processing<br>Data Entry<br>Prescriptions<br>Medical Readiness<br>MWDE Reports<br>Adm<br>Immunizations<br>Health Assessments<br>Medical Readiness<br>Pre-Deployment Health Assessment<br>HCP Signature Required<br>Pre/Post/PDHRA Count<br>Priority Soldier<br>Forms Completed By Providers<br>RHRP Store and Forward Tracking<br>PDHRA Event Code Workflow<br>PDHRA Declination<br>2012 Reports<br>cation<br>Type SSN or Scan ID Card<br>Enter SSN<br>MWDE UPDATES<br>Latest Message - 2012/09/06<br>**Changes Coming for MEDPROS.**<br>**On 11 Sep 2012, MEDPROS will be** |
| 2. | Select the date range. |
| 3. | Enter UIC. This is optional (default report will provide information on ALL UICs of Soldiers processed). |
| 4. | From the Display drop down menu (as shown below), click on appropriate selection. |
| 5. | From the Deployable Status drop down menu (as shown below), click on appropriate selection. |
| 6. | Click **Run Report**. The Pre-Deployment Health Assessment Report for the selected time period will be shown. |
|  |  Pre-deployment Health Assessment Report<br>MODIFY FILTERS<br>REPORT LEGEND<br>Report Selection Criteria<br>Report Filter Criteria<br>All Forms<br>All Forms<br>Latest Form<br>All Pre-DHAs<br>All Pre-DHAs<br>Deployable Only<br>Non-Deployable Only<br>Run Report<br>From Date: 2011/12/21<br>To Date: 2011/12/21<br>Enter UIC: (Optional)<br>Display: All Forms<br>Deployable Status: All Pre-DHAs |

| Step | What to do |
|---|---|


Pre-deployment Health Assessment Report
MODIFY FILTERS
REPORT LEGEND

SRP Pre-deployment Health Assessment Report

For Period 2010/01/01 Thru 2013/01/01

SRP Site: Skyline (All Pre-DHAs) (All Forms)

54 records found

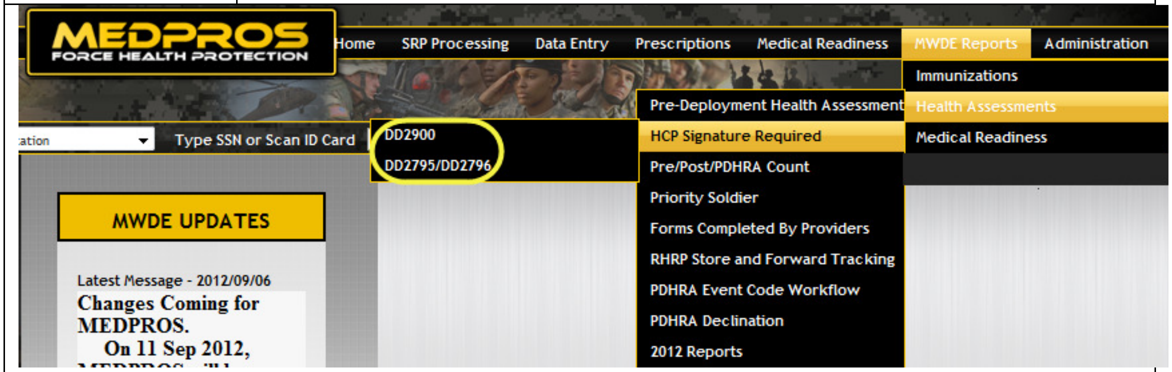
| NAME | RANK | SSN | UIC | PROVIDER NAME | AKO LID | DATE SIGNED | STATUS | DLC Categories | PREGNANT (DL5) |
|---|---|---|---|---|---|---|---|---|---|
| [redacted] | SGT | ***-** | WY15A1 | | [redacted] | 2011/11/29 | Deployable | | |
| [redacted] | Unk | ***-** | UNKNWN | | [redacted] | 2011/04/20 | Deployable | | N |
| [redacted] | PV2 | ***-** | W33333 | | [redacted] | 2011/04/12 | Deployable | | Y |
| [redacted] | MAJ | ***-** | WDJXT0 | [redacted] | [redacted] | 2011/02/11 | Deployable | | |
| [redacted] | CW4 | ***-** | WDJXB0 | [redacted] | [redacted] | 2011/02/11 | Deployable | | |
| [redacted] | LTC | ***-** | WDJXT0 | [redacted] | [redacted] | 2011/02/11 | Deployable | | |
| [redacted] | CAP | ***-** | W2UGAA | [redacted] | [redacted] | 2011/01/05 | Deployable | 1 | |
| [redacted] | SGT | ***-** | WY15A1 | | [redacted] | 2011/01/05 | Non-deployable | | |
| [redacted] | PV2 | ***-** | W33333 | | [redacted] | 2010/12/23 | Deployable | | Y |
| [redacted] | PV2 | ***-** | W33333 | | [redacted] | 2010/09/30 | Deployable | | Y |
| [redacted] | SGT | ***-** | WY15A1 | [redacted] | [redacted] | 2010/09/20 | Non-deployable | | |
| [redacted] | CIV | ***-** | UNKNWN | | [redacted] | 2010/09/16 | Deployable | | |
| [redacted] | CIV | ***-** | UNKNWN | [redacted] | [redacted] | 2010/08/19 | Non-deployable | | |
| [redacted] | SGM | ***-** | W85T01 | [redacted] | [redacted] | 2010/08/10 | Deployable | | |
| [redacted] | Unk | ***-** | UNKNWN | [redacted] | [redacted] | 2010/08/04 | Non-deployable | | N |

1 2 3 4

### 5.2.2 HCP Signature Required

**DD2900**

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, HCP Signature required and select DD2900. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
DD2900
DD2795/DD2796
ation
Type SSN or Scan ID Card
MWDE UPDATES

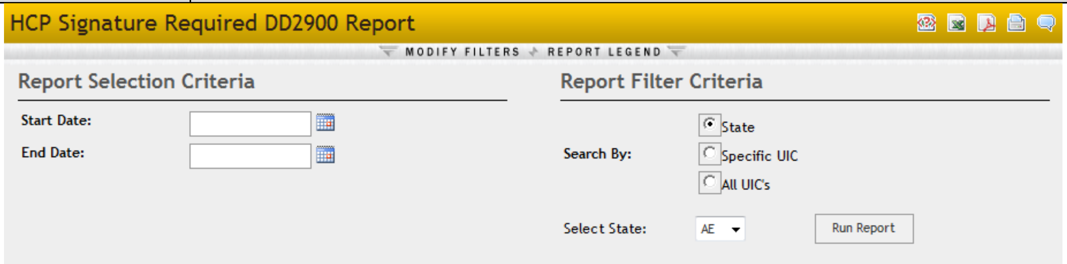
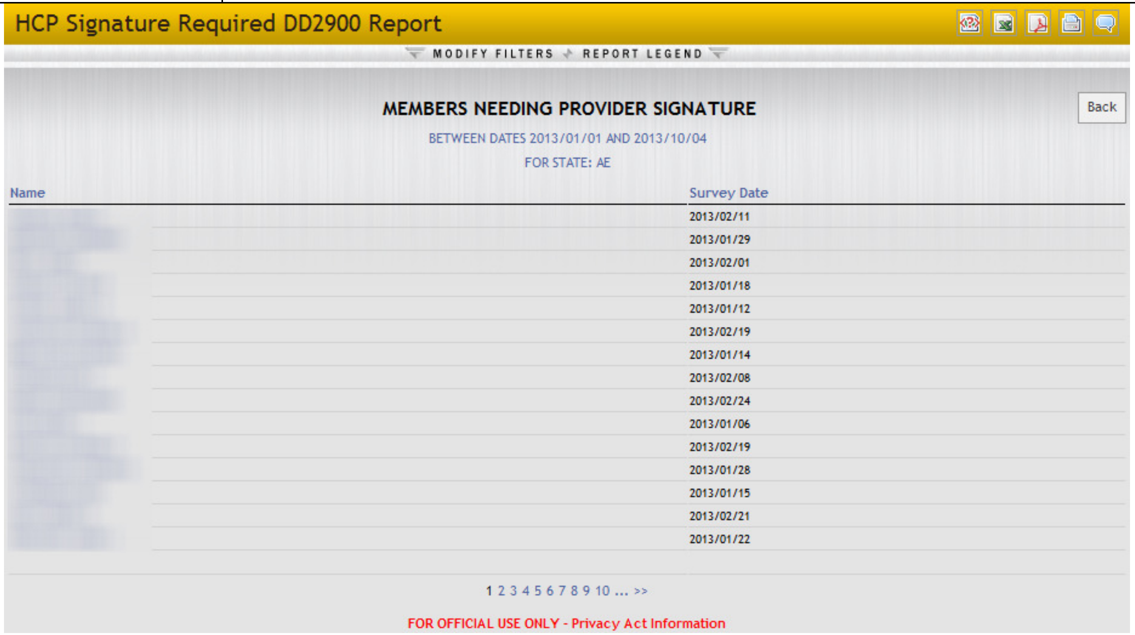
Latest Message - 2012/09/06

Changes Coming for MEDPROS.

On 11 Sep 2012,

| Step | What to do |
|---|---|
| 2. | Enter the Start Date. |
| 3. | Enter the End Date. |
| 4. | Search by State, Specific UIC, or All UIC's by clicking the corresponding radio button. |
| 5. | Select State from the drop down menu. (This drop down will only appear if State is selected in Step 4.) |

## DD2900

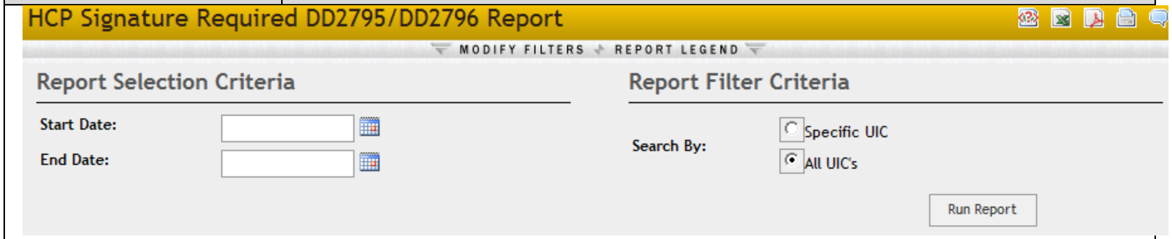
| Step | What to do |
|---|---|
| | <br>HCP Signature Required DD2900 Report<br>MODIFY FILTERS · REPORT LEGEND<br>Report Selection Criteria<br>Start Date:<br>End Date:<br>Report Filter Criteria<br>Search By: ● State ○ Specific UIC ○ All UIC's<br>Select State: AE<br>Run Report |
| 6. | Click **Run Report**. Members needing provider signature will be listed. |
| | <br>HCP Signature Required DD2900 Report<br>MODIFY FILTERS · REPORT LEGEND<br>Back<br>MEMBERS NEEDING PROVIDER SIGNATURE<br>BETWEEN DATES 2013/01/01 AND 2013/10/04<br>FOR STATE: AE<br>Name — Survey Date<br>[redacted] 2013/02/11<br>[redacted] 2013/01/29<br>[redacted] 2013/02/01<br>[redacted] 2013/01/18<br>[redacted] 2013/01/12<br>[redacted] 2013/02/19<br>[redacted] 2013/01/14<br>[redacted] 2013/02/08<br>[redacted] 2013/02/24<br>[redacted] 2013/01/06<br>[redacted] 2013/02/19<br>[redacted] 2013/01/28<br>[redacted] 2013/01/15<br>[redacted] 2013/02/21<br>[redacted] 2013/01/22<br>1 2 3 4 5 6 7 8 9 10 ... >><br>FOR OFFICIAL USE ONLY - Privacy Act Information |

## DD2795/2796

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, and HCP Signature required and select DD2795/2796. |
| 2. | Enter the Start Date for period of report. |
| 3. | Enter the End Date for period of report. |
| 4. | Search by Specific UIC or All UIC's by clicking the corresponding radio button. |

**DD2795/2796**

| Step | What to do |
|---|---|



HCP Signature Required DD2795/DD2796 Report

**Report Selection Criteria**

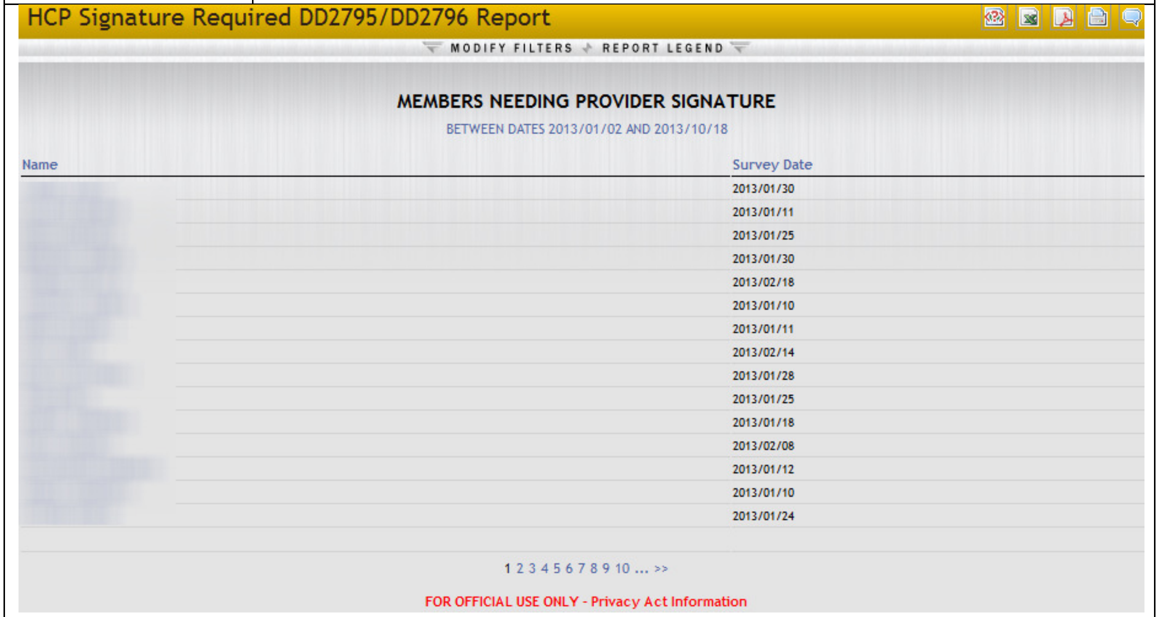
Start Date:

End Date:

**Report Filter Criteria**

Search By: ○ Specific UIC ● All UIC's

| | |
|---|---|
| 5. | Click **Run Report**. Members needing provider signature will be listed. |



HCP Signature Required DD2795/DD2796 Report

MEMBERS NEEDING PROVIDER SIGNATURE

BETWEEN DATES 2013/01/02 AND 2013/10/18

| Name | Survey Date |
|---|---|
| [redacted] | 2013/01/30 |
| [redacted] | 2013/01/11 |
| [redacted] | 2013/01/25 |
| [redacted] | 2013/01/30 |
| [redacted] | 2013/02/18 |
| [redacted] | 2013/01/10 |
| [redacted] | 2013/01/11 |
| [redacted] | 2013/02/14 |
| [redacted] | 2013/01/28 |
| [redacted] | 2013/01/25 |
| [redacted] | 2013/01/18 |
| [redacted] | 2013/02/08 |
| [redacted] | 2013/01/12 |
| [redacted] | 2013/01/10 |
| [redacted] | 2013/01/24 |

1 2 3 4 5 6 7 8 9 10 ... >>

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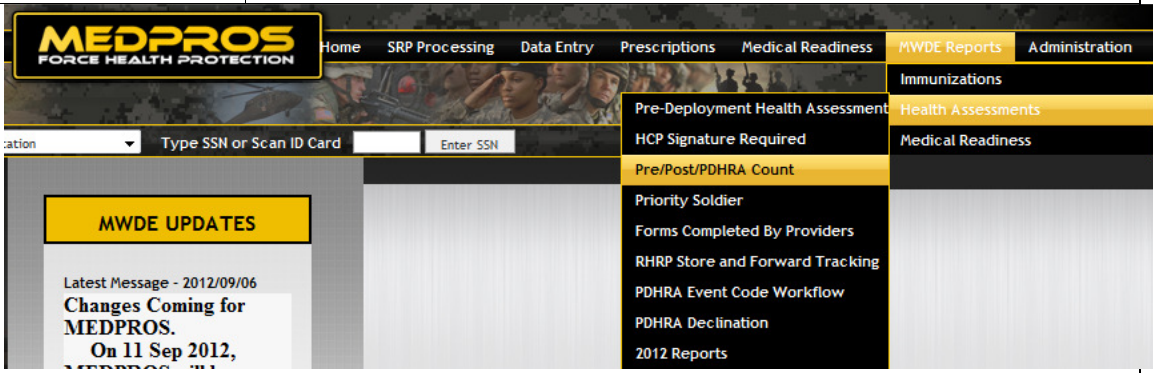
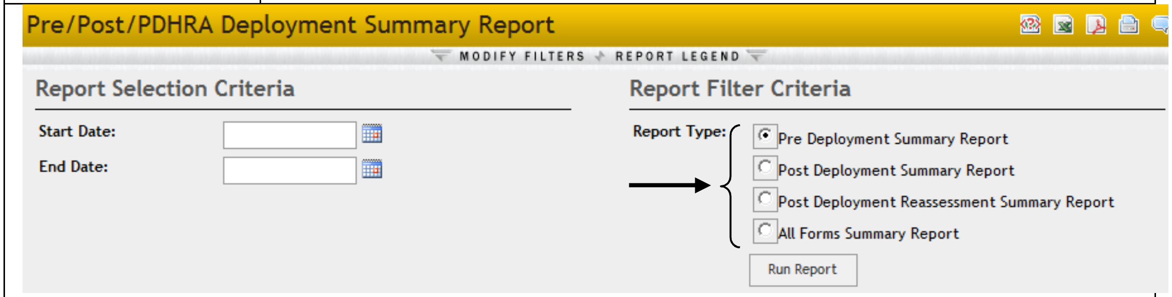
### 5.2.3 Pre/Post/PDHRA Count

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, and select Pre/Post/PDHRA Count. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

Latest Message - 2012/09/06
Changes Coming for MEDPROS.
On 11 Sep 2012,

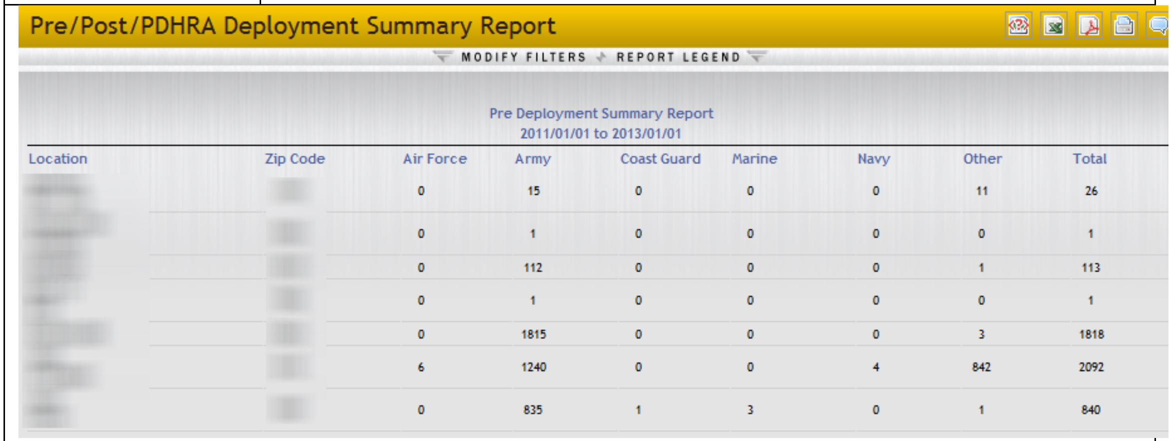
| | |
|---|---|
| 2. | Select the Start and End Date. |
| 3. | Select a Report Type by clicking one of the radio buttons corresponding to the report. |


Pre/Post/PDHRA Deployment Summary Report
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
Run Report

Start Date:
End Date:

Report Type:
● Pre Deployment Summary Report
○ Post Deployment Summary Report
○ Post Deployment Reassessment Summary Report
○ All Forms Summary Report

| | |
|---|---|
| 4. | Click **Run Report**. |

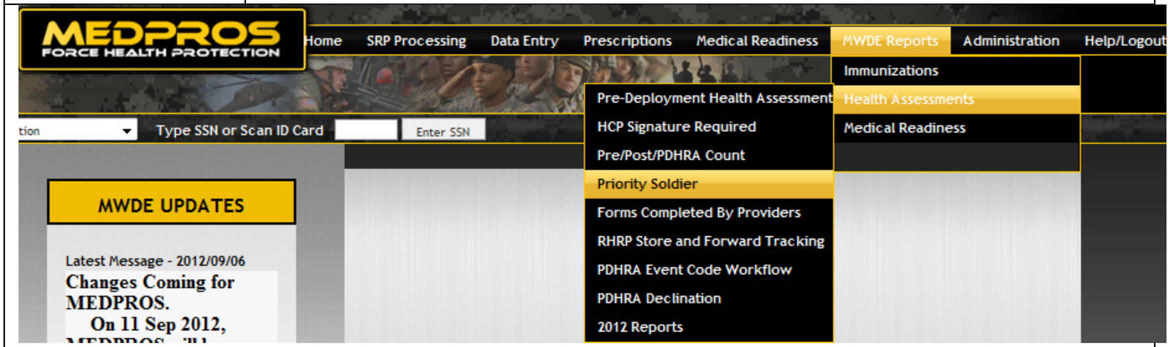

Pre/Post/PDHRA Deployment Summary Report
MODIFY FILTERS
REPORT LEGEND

Pre Deployment Summary Report
2011/01/01 to 2013/01/01

| Location | Zip Code | Air Force | Army | Coast Guard | Marine | Navy | Other | Total |
|---|---|---|---|---|---|---|---|---|
| [redacted] | [redacted] | 0 | 15 | 0 | 0 | 0 | 11 | 26 |
| [redacted] | [redacted] | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| [redacted] | [redacted] | 0 | 112 | 0 | 0 | 0 | 1 | 113 |
| [redacted] | [redacted] | 0 | 1 | 0 | 0 | 0 | 0 | 1 |
| [redacted] | [redacted] | 0 | 1815 | 0 | 0 | 0 | 3 | 1818 |
| [redacted] | [redacted] | 6 | 1240 | 0 | 0 | 4 | 842 | 2092 |
| [redacted] | [redacted] | 0 | 835 | 1 | 3 | 0 | 1 | 840 |

### 5.2.4 Priority Soldier

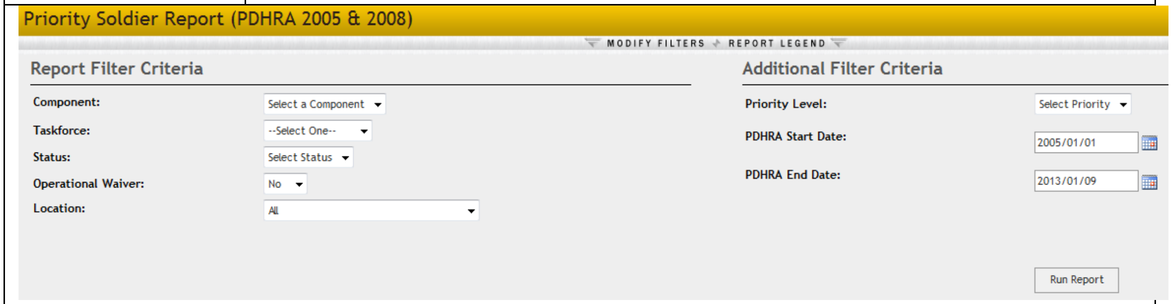
| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, select Priority Soldier. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help/Logout
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
tion
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

Latest Message - 2012/09/06
Changes Coming for MEDPROS.
On 11 Sep 2012,

**Note: This feature is not available for all users and requires special access.**

| Step | What to do |
|---|---|
| 2. | Select Component. |
| 3. | Select Status. |
| 4. | Select Operational Waiver status (Yes/No) |
| 5. | Select Location. |
| 6. | Select Priority Level. |
| 7. | Select PDHRA Start and End Date. |


MODIFY FILTERS
REPORT LEGEND
Run Report

Priority Soldier Report (PDHRA 2005 & 2008)

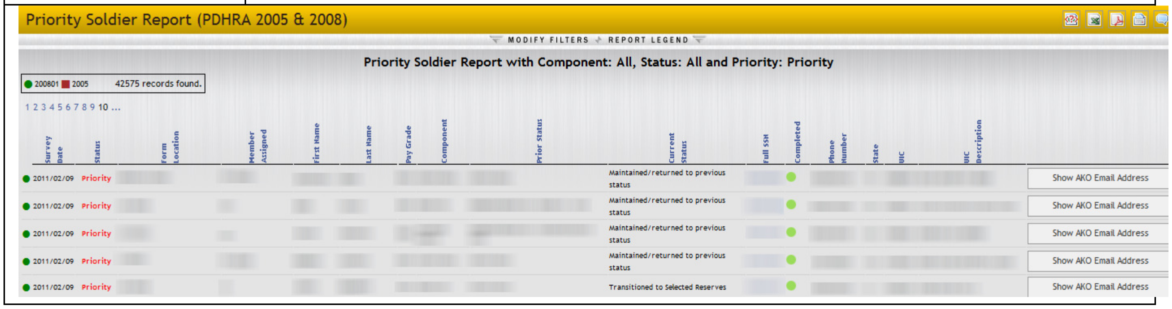
Report Filter Criteria

Component: Select a Component
Taskforce: --Select One--
Status: Select Status
Operational Waiver: No
Location: All

Additional Filter Criteria

Priority Level: Select Priority
PDHRA Start Date: 2005/01/01
PDHRA End Date: 2013/01/09

| Step | What to do |
|---|---|
| 8. | Click Run Report. |


MODIFY FILTERS
REPORT LEGEND

Priority Soldier Report (PDHRA 2005 & 2008)

Priority Soldier Report with Component: All, Status: All and Priority: Priority

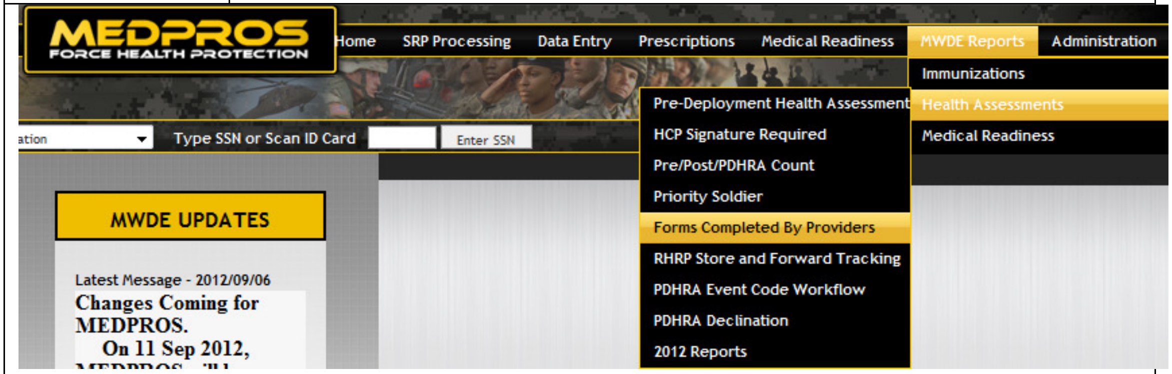
● 200801 ■ 2005 42575 records found.

1 2 3 4 5 6 7 8 9 10 ...

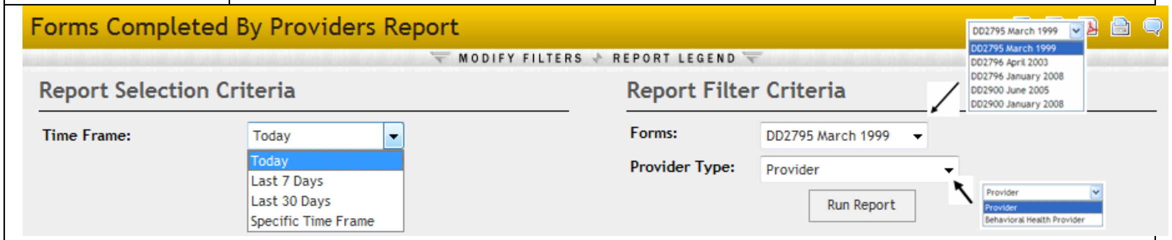
| Survey Date | Status | Form Location | Member Assigned | First Name | Last Name | Pay Grade | Component | Prior Status | Current Status | Full SSN | Completed | Phone Number | State | UIC | UIC Description | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ● 2011/02/09 | Priority | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | | Maintained/returned to previous status | [redacted] | ● | [redacted] | [redacted] | [redacted] | [redacted] | Show AKO Email Address |
| ● 2011/02/09 | Priority | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | Maintained/returned to previous status | [redacted] | ● | [redacted] | [redacted] | [redacted] | [redacted] | Show AKO Email Address |
| ● 2011/02/09 | Priority | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | Maintained/returned to previous status | [redacted] | ● | [redacted] | [redacted] | [redacted] | [redacted] | Show AKO Email Address |
| ● 2011/02/09 | Priority | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | | Maintained/returned to previous status | [redacted] | ● | [redacted] | [redacted] | [redacted] | [redacted] | Show AKO Email Address |
| ● 2011/02/09 | Priority | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | | Transitioned to Selected Reserves | [redacted] | ● | [redacted] | [redacted] | [redacted] | [redacted] | Show AKO Email Address |

### 5.2.5 Forms Completed By Providers

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, select Forms Completed By Providers. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES
Latest Message - 2012/09/06
Changes Coming for MEDPROS.
On 11 Sep 2012,

| | |
|---|---|
| 2. | Select the Time Frame. |
| 3. | Select the specific form you want the report for from the "Forms" dropdown choices. |
| 4. | Select Provider Type from the dropdown menu |

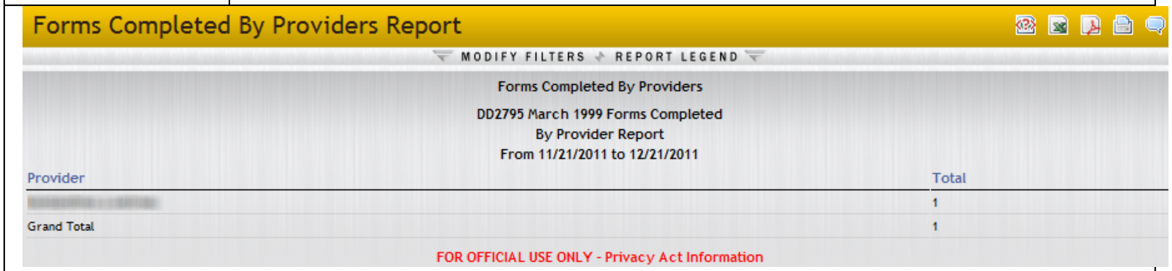

Forms Completed By Providers Report
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
Today
Last 7 Days
Last 30 Days
Specific Time Frame
DD2795 March 1999
DD2795 March 1999
DD2796 April 2003
DD2796 January 2008
DD2900 June 2005
DD2900 January 2008
Provider
Provider
Behavioral Health Provider
Run Report

Time Frame: Today

Forms: DD2795 March 1999

Provider Type: Provider

| | |
|---|---|
| 5. | Click **Run Report**. |


Forms Completed By Providers Report
MODIFY FILTERS
REPORT LEGEND

Forms Completed By Providers

DD2795 March 1999 Forms Completed
By Provider Report
From 11/21/2011 to 12/21/2011

| Provider | Total |
|---|---|
| [redacted] | 1 |
| Grand Total | 1 |

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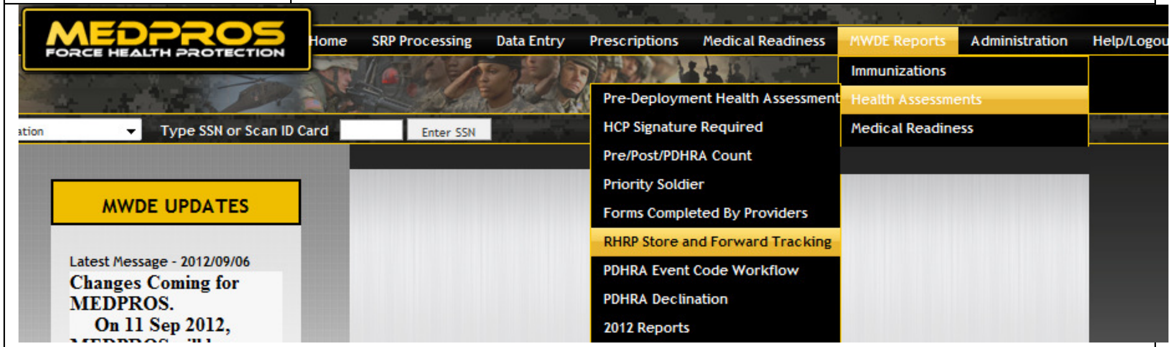
### 5.2.6 RHRP Store and Forward Tracking

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, select RHRP Store and Forward Tracking. |

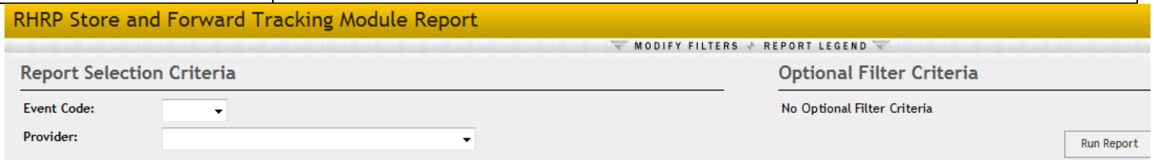

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Help/Logou
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

Latest Message - 2012/09/06

Changes Coming for MEDPROS.

On 11 Sep 2012,

| Step | What to do |
|---|---|
| 2. | Select an Event Code from the drop down menu. |
| 3. | Select the Provider from drop down menu. |


RHRP Store and Forward Tracking Module Report

MODIFY FILTERS
REPORT LEGEND

Report Selection Criteria

Event Code:

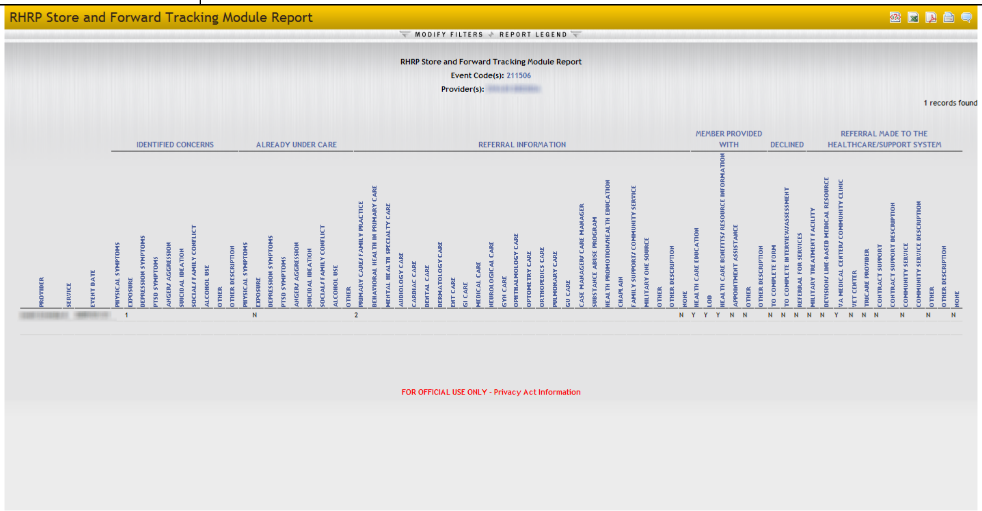
Provider:

Optional Filter Criteria

No Optional Filter Criteria

Run Report

| Step | What to do |
|---|---|
| 4. | Click **Run Report**. |


RHRP Store and Forward Tracking Module Report

MODIFY FILTERS
REPORT LEGEND

RHRP Store and Forward Tracking Module Report

Event Code(s): 211506

Provider(s): [redacted]

1 records found

IDENTIFIED CONCERNS
ALREADY UNDER CARE
REFERRAL INFORMATION
MEMBER PROVIDED WITH
DECLINED
REFERRAL MADE TO THE HEALTHCARE/SUPPORT SYSTEM
PROVIDER
SERVICE
EVENT DATE

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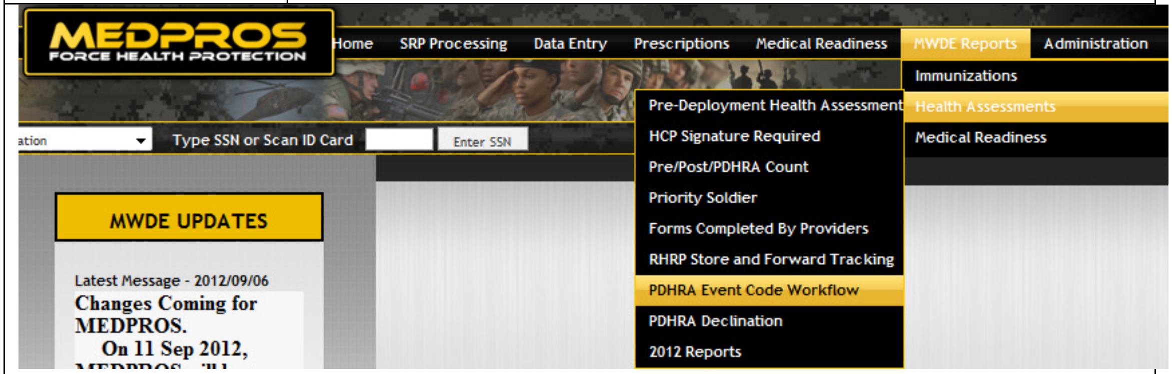
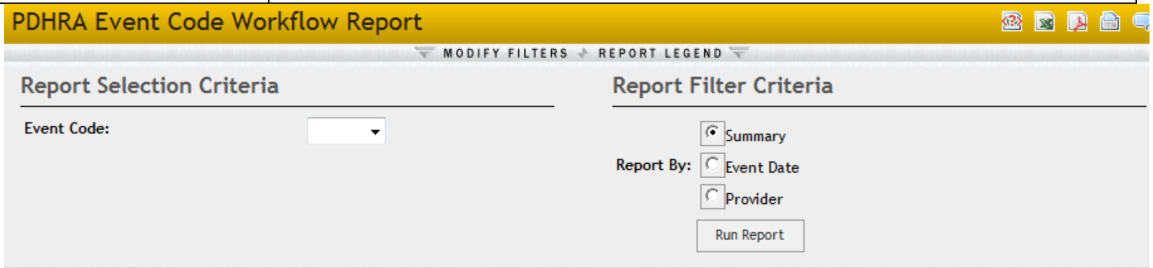
### 5.2.7 PDHRA Event Code Workflow

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, and select Soldier PDHRA Event Code Workflow. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

Latest Message - 2012/09/06
Changes Coming for MEDPROS.
On 11 Sep 2012,

| Step | What to do |
|---|---|
| 2. | Enter the Event Code. |
| 3. | Select a report by clicking one of the radio buttons corresponding to the report you want. |


MODIFY FILTERS
REPORT LEGEND
Run Report

PDHRA Event Code Workflow Report

Report Selection Criteria

Event Code:

Report Filter Criteria

Report By: ● Summary ○ Event Date ○ Provider

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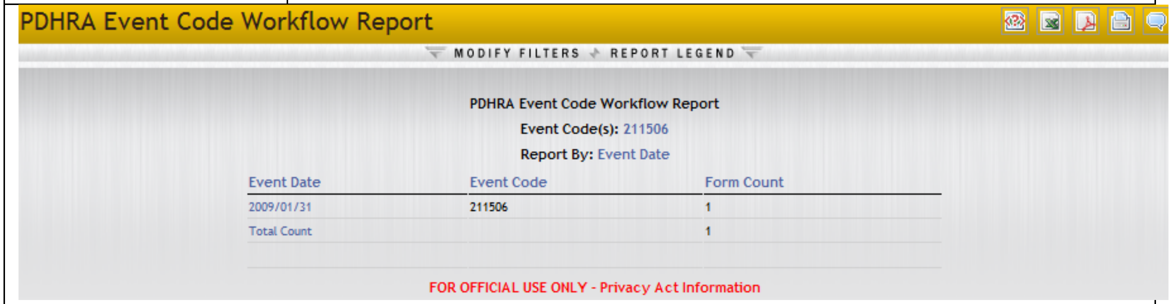
| Step | What to do |
|---|---|
| 4. | Click **Run Report**. |


MODIFY FILTERS
REPORT LEGEND

PDHRA Event Code Workflow Report

PDHRA Event Code Workflow Report
Event Code(s): 211506
Report By: Event Date

| Event Date | Event Code | Form Count |
|---|---|---|
| 2009/01/31 | 211506 | 1 |
| Total Count | | 1 |

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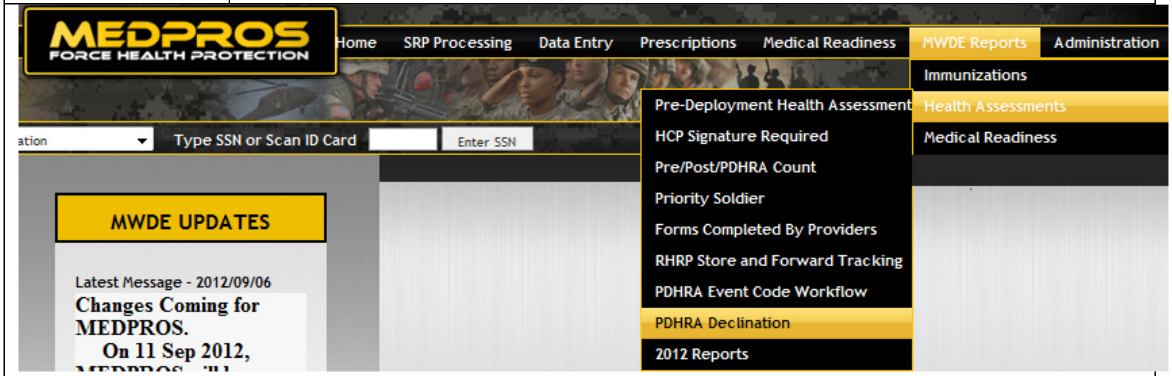
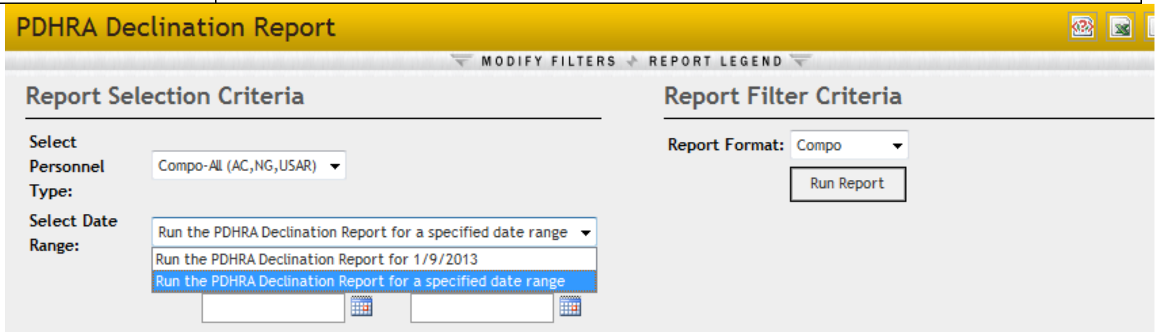
### 5.2.8 PDHRA Declination

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, select PDHRA Declination. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

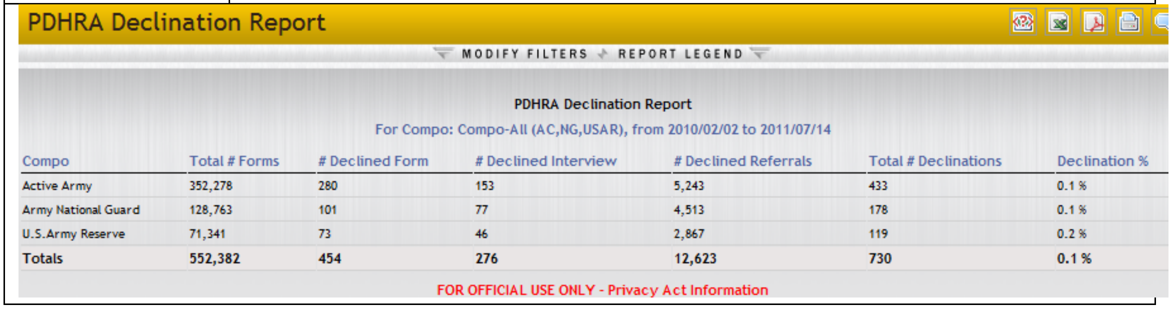
Latest Message - 2012/09/06
Changes Coming for MEDPROS.
On 11 Sep 2012,

| Step | What to do |
|---|---|
| 2. | Select Personnel Type. |
| 3. | Select Date Range or accept default of today's date only. |
| 4. | Select Report Format. |


PDHRA Declination Report
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
Run Report
Run the PDHRA Declination Report for 1/9/2013
Run the PDHRA Declination Report for a specified date range

Select Personnel Type: Compo-All (AC,NG,USAR)
Select Date Range: Run the PDHRA Declination Report for a specified date range
Report Format: Compo

| Step | What to do |
|---|---|
| 5. | Click **Run Report**. |


PDHRA Declination Report
MODIFY FILTERS
REPORT LEGEND

PDHRA Declination Report
For Compo: Compo-All (AC,NG,USAR), from 2010/02/02 to 2011/07/14

| Compo | Total # Forms | # Declined Form | # Declined Interview | # Declined Referrals | Total # Declinations | Declination % |
|---|---|---|---|---|---|---|
| Active Army | 352,278 | 280 | 153 | 5,243 | 433 | 0.1 % |
| Army National Guard | 128,763 | 101 | 77 | 4,513 | 178 | 0.1 % |
| U.S.Army Reserve | 71,341 | 73 | 46 | 2,867 | 119 | 0.2 % |
| Totals | 552,382 | 454 | 276 | 12,623 | 730 | 0.1 % |

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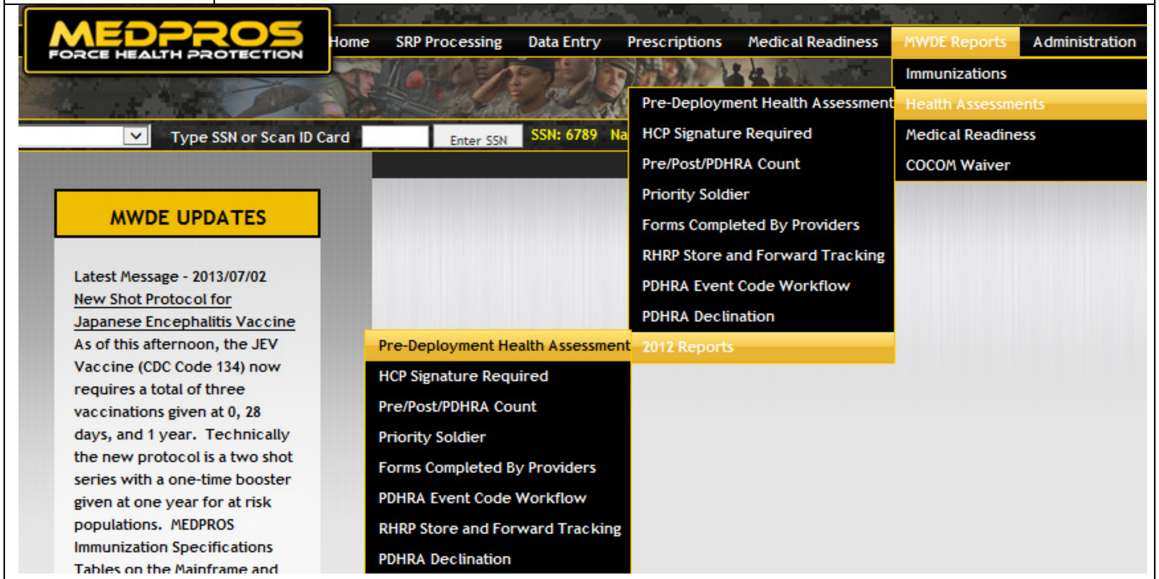
### 5.2.9 2012 Reports

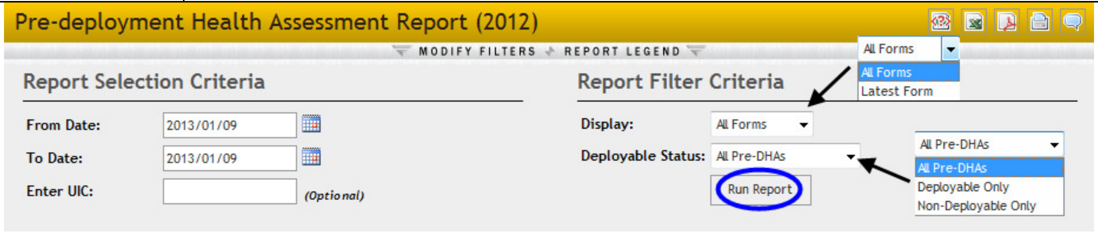
#### *5.2.9.1Pre-Deployment Health Assessment*

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select Pre-Deployment Health Assessment. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

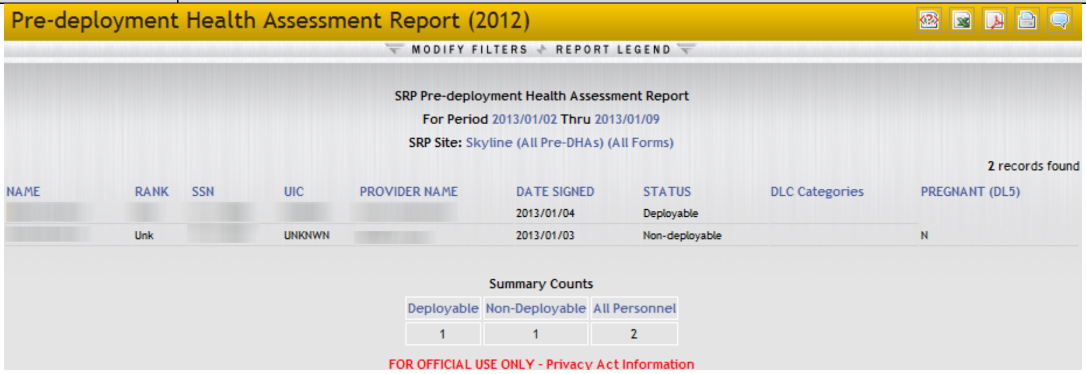
Latest Message - 2013/07/02
New Shot Protocol for Japanese Encephalitis Vaccine
As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and

| Step | What to do |
|---|---|
| 2. | Select the date range. |
| 3. | Enter UIC. This is optional. |
| 4. | From the Display drop down menu (as shown below), click on appropriate selection. |
| 5. | From the Deployable Status drop down menu (as shown below), click on appropriate selection. |
| 6. | Click **Run Report**. The Pre-Deployment Health Assessment Report (2012) for the selected time period will be shown. |


Pre-deployment Health Assessment Report (2012)
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
All Forms
All Forms
Latest Form
All Pre-DHAs
All Pre-DHAs
Deployable Only
Non-Deployable Only
Run Report

From Date: 2013/01/09
To Date: 2013/01/09
Enter UIC: (Optional)
Display: All Forms
Deployable Status: All Pre-DHAs

| Step | What to do |
|---|---|



Pre-deployment Health Assessment Report (2012)

MODIFY FILTERS
REPORT LEGEND

SRP Pre-deployment Health Assessment Report
For Period 2013/01/02 Thru 2013/01/09
SRP Site: Skyline (All Pre-DHAs) (All Forms)

2 records found

| NAME | RANK | SSN | UIC | PROVIDER NAME | DATE SIGNED | STATUS | DLC Categories | PREGNANT (DL5) |
|---|---|---|---|---|---|---|---|---|
| [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | 2013/01/04 | Deployable | | |
| [redacted] | Unk | [redacted] | UNKNWN | [redacted] | 2013/01/03 | Non-deployable | | N |

Summary Counts

| Deployable | Non-Deployable | All Personnel |
|---|---|---|
| 1 | 1 | 2 |

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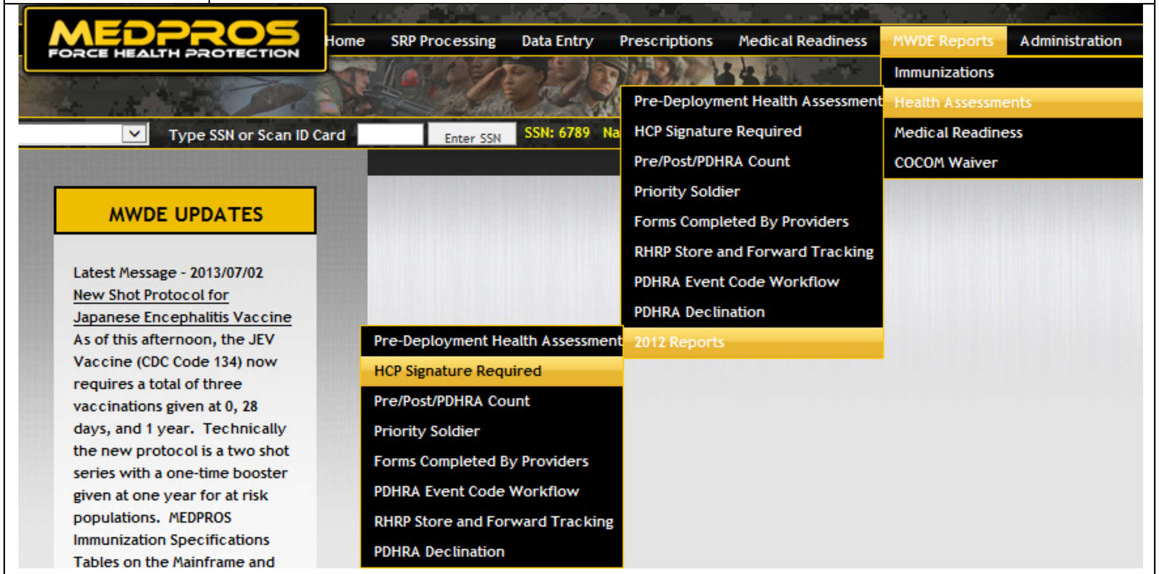
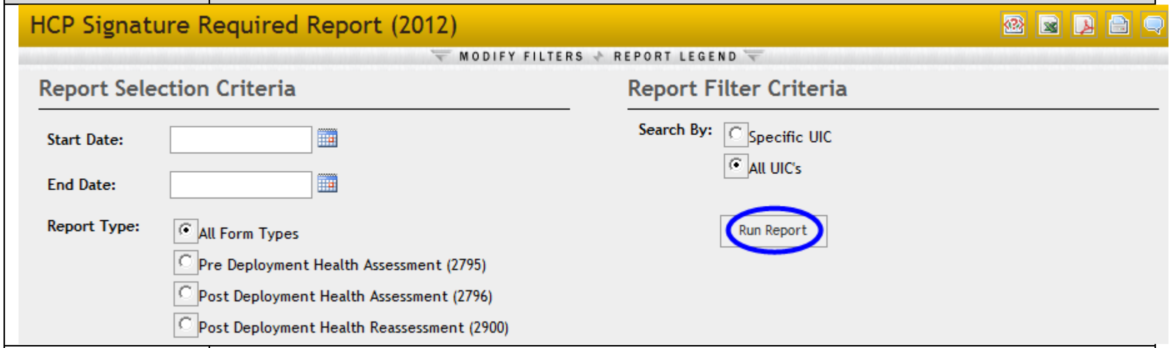
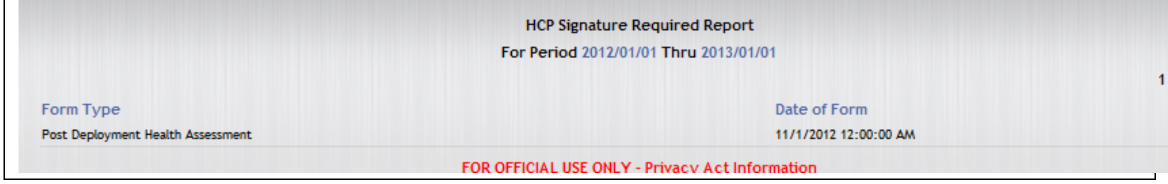
### 5.2.9.2HCP Signature Required

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select HCP Signature Required. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

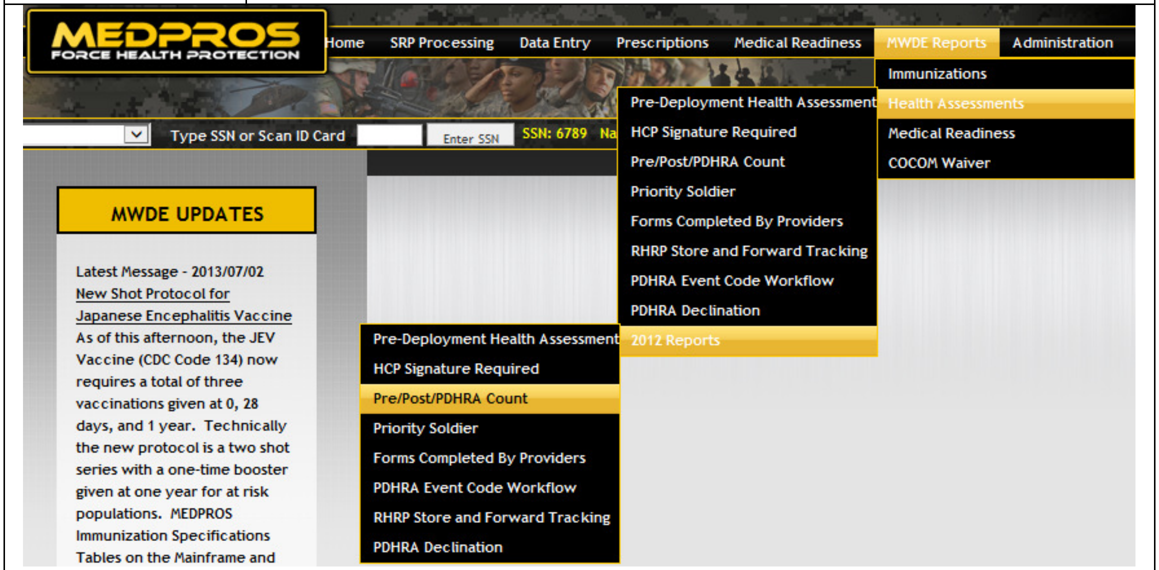
Latest Message - 2013/07/02
New Shot Protocol for Japanese Encephalitis Vaccine
As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and

| Step | What to do |
|---|---|
| 2. | Enter the Start Date. |
| 3. | Enter the End Date. |
| 4. | Select a Report Type. |
| 5. | Search by Specific UIC or All UIC’s. |

| Step | What to do |
|---|---|
|  | HCP Signature Required Report (2012)<br>MODIFY FILTERS REPORT LEGEND<br>Report Selection Criteria<br>Start Date:<br>End Date:<br>Report Type: ● All Form Types<br>○ Pre Deployment Health Assessment (2795)<br>○ Post Deployment Health Assessment (2796)<br>○ Post Deployment Health Reassessment (2900)<br>Report Filter Criteria<br>Search By: ○ Specific UIC<br>● All UIC's<br>Run Report |
| 6. | Click **Run Report**. Members needing provider signature will be listed. |
|  | HCP Signature Required Report<br>For Period 2012/01/01 Thru 2013/01/01<br>1<br>Form Type: Post Deployment Health Assessment<br>Date of Form: 11/1/2012 12:00:00 AM<br>FOR OFFICIAL USE ONLY - Privacy Act Information |

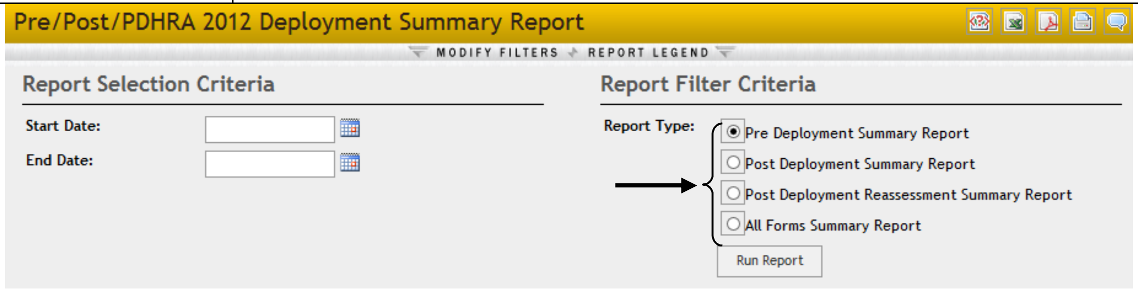
### 5.2.9.3Pre/Post/PDHRA Count

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select Pre/Post/PDHRA Count. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

Latest Message - 2013/07/02
New Shot Protocol for Japanese Encephalitis Vaccine
As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and

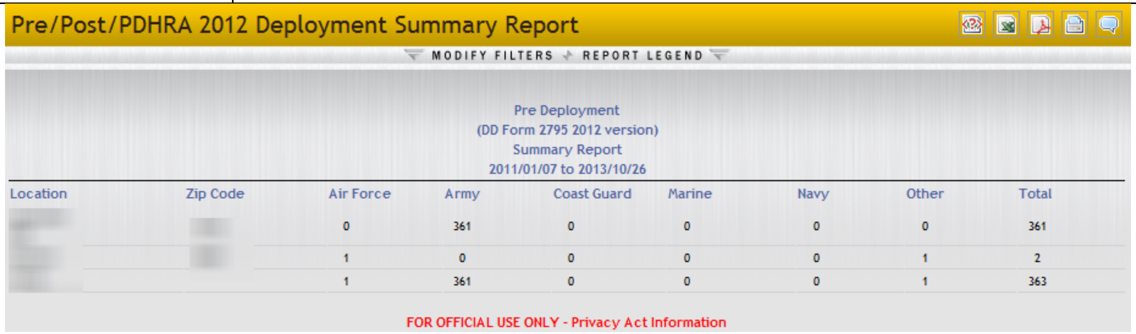
| Step | What to do |
|---|---|
| 2. | Select the Start and End Date. |
| 3. | Select a Report Type by clicking one of the radio buttons corresponding to the report. |


Pre/Post/PDHRA 2012 Deployment Summary Report
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
Run Report

Start Date:
End Date:

Report Type:
● Pre Deployment Summary Report
○ Post Deployment Summary Report
○ Post Deployment Reassessment Summary Report
○ All Forms Summary Report

| Step | What to do |
|---|---|
| 4. | Click **Run Report**. |


Pre/Post/PDHRA 2012 Deployment Summary Report
MODIFY FILTERS
REPORT LEGEND

Pre Deployment
(DD Form 2795 2012 version)
Summary Report
2011/01/07 to 2013/10/26

| Location | Zip Code | Air Force | Army | Coast Guard | Marine | Navy | Other | Total |
|---|---|---|---|---|---|---|---|---|
| [redacted] | [redacted] | 0 | 361 | 0 | 0 | 0 | 0 | 361 |
| [redacted] | [redacted] | 1 | 0 | 0 | 0 | 0 | 1 | 2 |
| [redacted] | | 1 | 361 | 0 | 0 | 0 | 1 | 363 |

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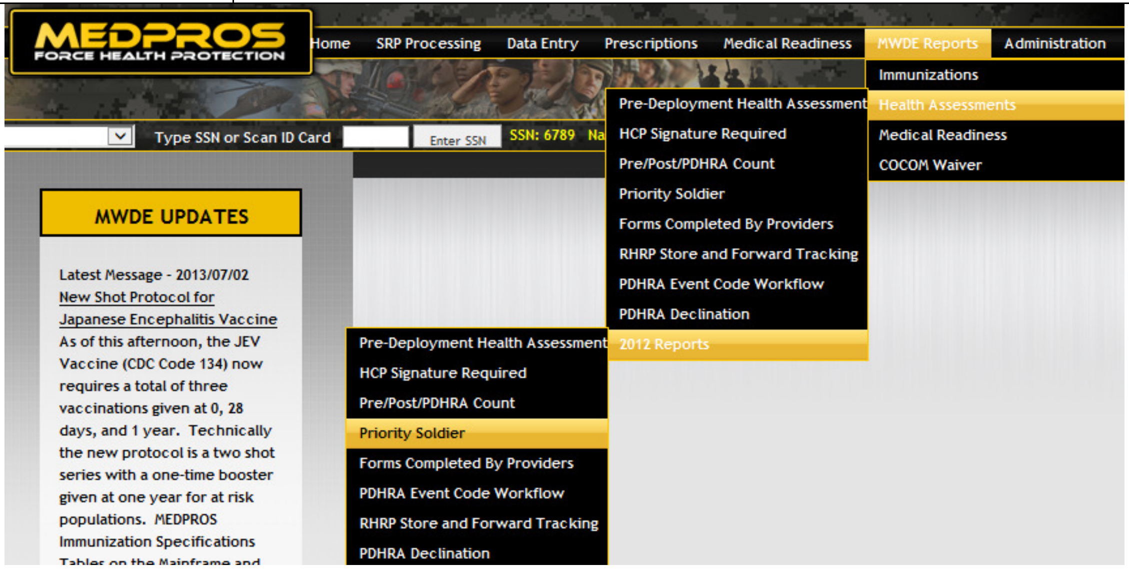
#### *5.2.9.4Priority Soldier*

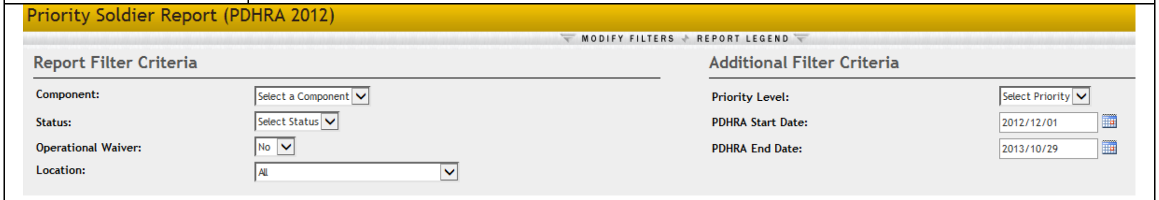
| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select Priority Soldier. |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

Latest Message - 2013/07/02
New Shot Protocol for Japanese Encephalitis Vaccine
As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and

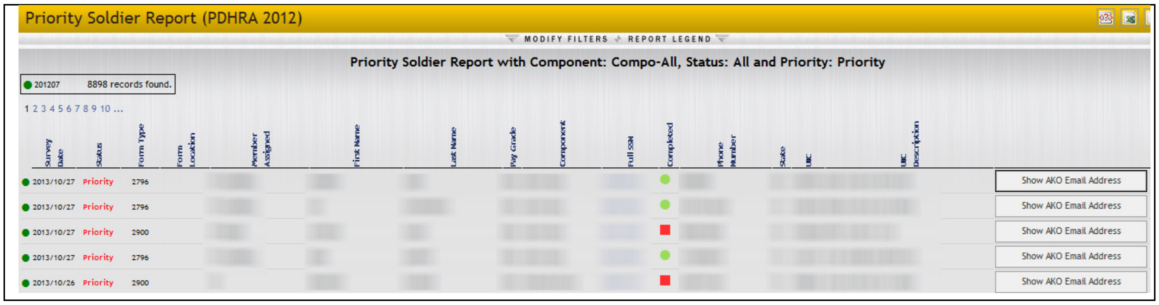
**Note: This feature is not available for all users and requires special access.**

| Step | What to do |
|---|---|
| 2. | Select Component. |
| 3. | Select Status. |
| 4. | Select Operational Waiver status (Yes/No) |
| 5. | Select Location. |
| 6. | Select Priority Level. |
| 7. | Select PDHRA Start and End Date. |


Priority Soldier Report (PDHRA 2012)
MODIFY FILTERS
REPORT LEGEND
Report Filter Criteria
Additional Filter Criteria

Component: Select a Component
Status: Select Status
Operational Waiver: No
Location: All
Priority Level: Select Priority
PDHRA Start Date: 2012/12/01
PDHRA End Date: 2013/10/29

| Step | What to do |
|---|---|
| 8. | Click Run Report. |



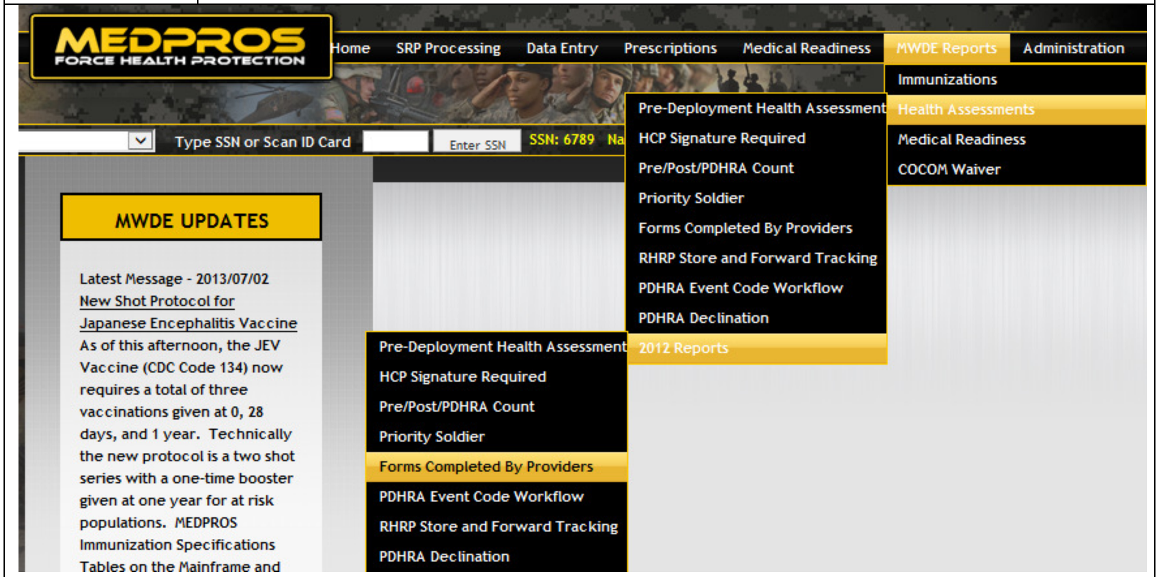
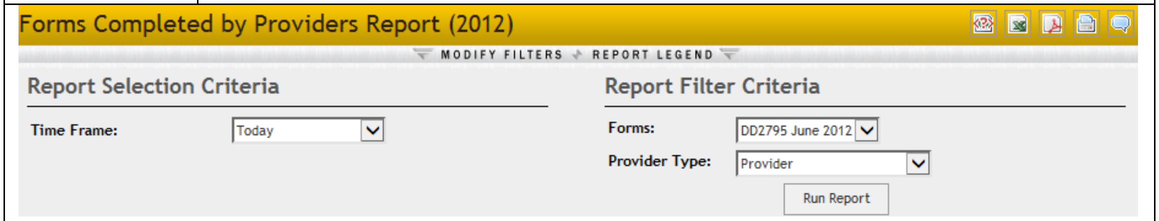
Priority Soldier Report (PDHRA 2012)

Priority Soldier Report with Component: Compo-All, Status: All and Priority: Priority

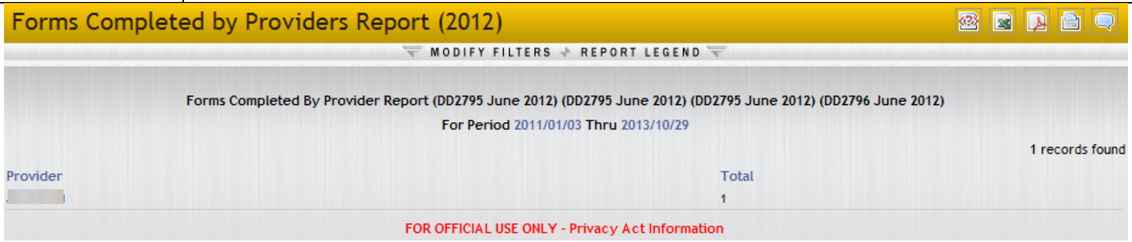
201207 8898 records found.

MODIFY FILTERS
REPORT LEGEND
1 2 3 4 5 6 7 8 9 10 ...
Survey Date
Status
Form Type
Form Location
Member Assigned
First Name
Last Name
Pay Grade
Component
Full SSN
Completed
Phone Number
State
UIC
UIC Description
2013/10/27 Priority 2796
2013/10/27 Priority 2796
2013/10/27 Priority 2900
2013/10/27 Priority 2796
2013/10/26 Priority 2900
Show AKO Email Address

### 5.2.9.5Forms Completed By Providers

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select Forms Completed By Providers. |
| | <br>MWDE UPDATES<br>Latest Message - 2013/07/02<br>New Shot Protocol for Japanese Encephalitis Vaccine<br>As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and<br> MEDPROS<br>FORCE HEALTH PROTECTION<br>Home<br>SRP Processing<br>Data Entry<br>Prescriptions<br>Medical Readiness<br>MWDE Reports<br>Administration<br>Type SSN or Scan ID Card<br>Enter SSN<br>SSN: 6789<br>Immunizations<br>Health Assessments<br>Medical Readiness<br>COCOM Waiver<br>Pre-Deployment Health Assessment<br>HCP Signature Required<br>Pre/Post/PDHRA Count<br>Priority Soldier<br>Forms Completed By Providers<br>RHRP Store and Forward Tracking<br>PDHRA Event Code Workflow<br>PDHRA Declination<br>2012 Reports<br>Pre-Deployment Health Assessment<br>HCP Signature Required<br>Pre/Post/PDHRA Count<br>Priority Soldier<br>Forms Completed By Providers<br>PDHRA Event Code Workflow<br>RHRP Store and Forward Tracking<br>PDHRA Declination |
| 2. | Select the Time Frame. |
| 3. | Select the specific form you want the report for from the “Forms” dropdown choices. |
| 4. | Select Provider Type from the dropdown menu |
| | <br>Forms Completed by Providers Report (2012)<br>Report Selection Criteria<br>Time Frame: Today<br>Report Filter Criteria<br>Forms: DD2795 June 2012<br>Provider Type: Provider<br> MODIFY FILTERS<br>REPORT LEGEND<br>Run Report |

| | |
|---|---|
| 5. | Click **Run Report**. |


Forms Completed by Providers Report (2012)

MODIFY FILTERS
REPORT LEGEND

Forms Completed By Provider Report (DD2795 June 2012) (DD2795 June 2012) (DD2795 June 2012) (DD2796 June 2012)

For Period 2011/01/03 Thru 2013/10/29

1 records found

| Provider | Total |
|---|---|
| [redacted] | 1 |

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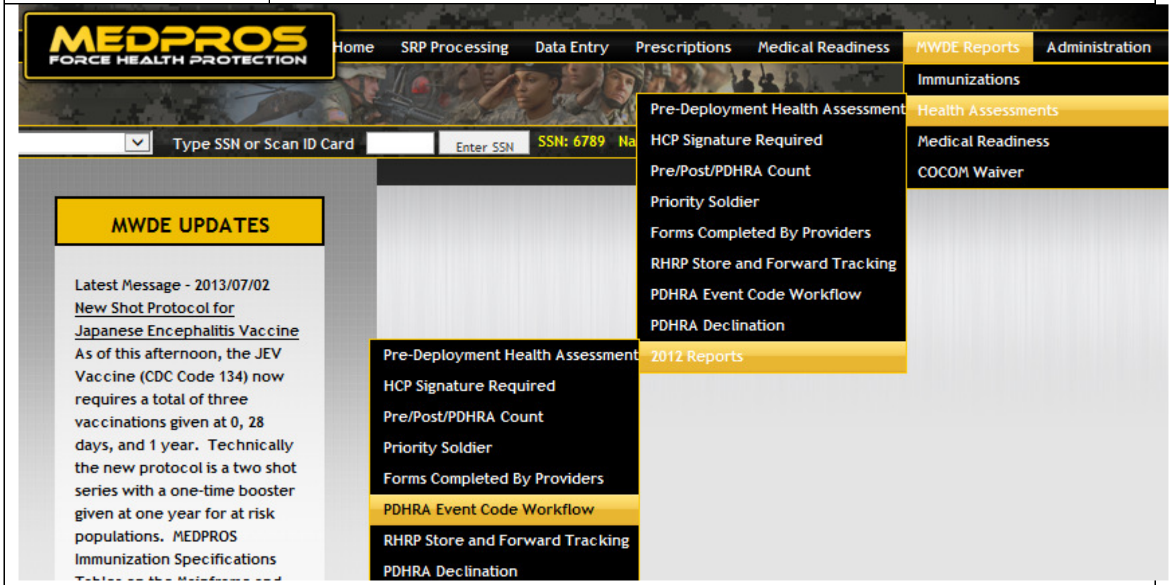
### *5.2.9.6PDHRA Event Code Workflow*

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select Soldier PDHRA Event Code Workflow. |

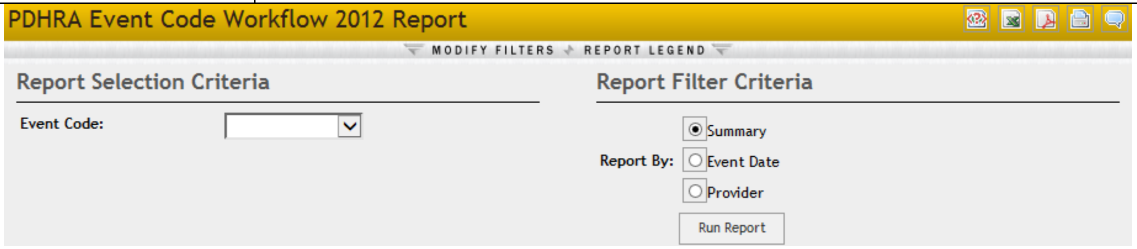

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
MWDE UPDATES

Latest Message - 2013/07/02

New Shot Protocol for Japanese Encephalitis Vaccine

As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications

| Step | What to do |
|---|---|
| 2. | Enter the Event Code. |
| 3. | Select a report by clicking one of the radio buttons corresponding to the report you want. |


PDHRA Event Code Workflow 2012 Report

MODIFY FILTERS
REPORT LEGEND

Report Selection Criteria

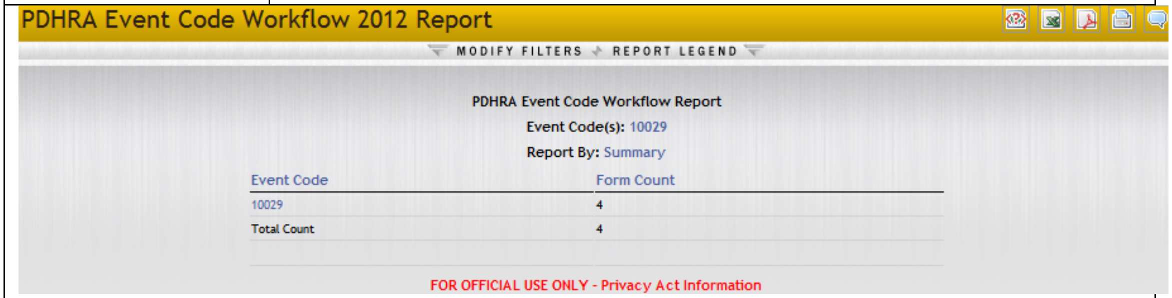
Event Code:

Report Filter Criteria

Report By: ● Summary ○ Event Date ○ Provider

Run Report

| | |
|---|---|
| 4. | Click **Run Report**. |



PDHRA Event Code Workflow 2012 Report

MODIFY FILTERS ✦ REPORT LEGEND

PDHRA Event Code Workflow Report

Event Code(s): 10029

Report By: Summary

| Event Code | Form Count |
|---|---|
| 10029 | 4 |
| Total Count | 4 |

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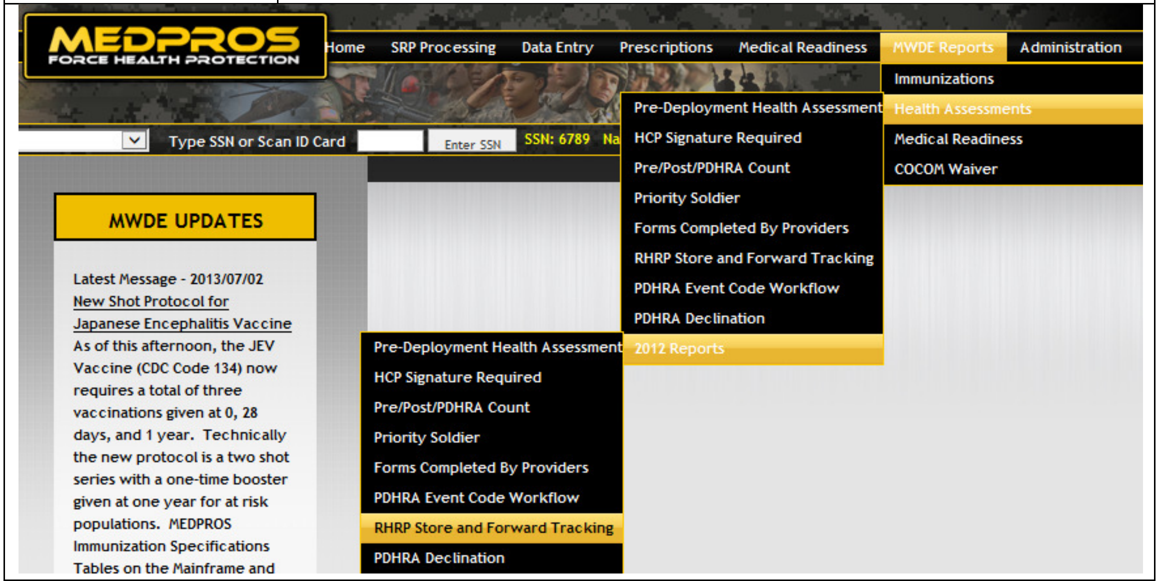
### 5.2.9.7RHRP Store and Forward Tracking

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select RHRP Store and Forward Tracking. |



MEDPROS
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Medical Readiness
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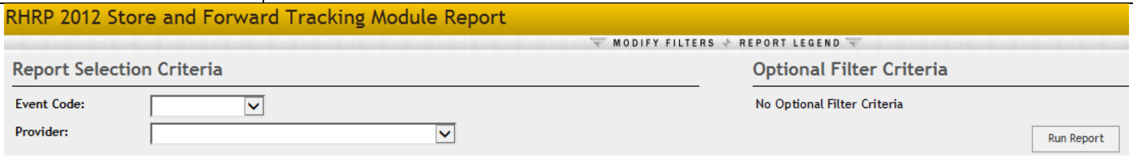
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

Latest Message - 2013/07/02
New Shot Protocol for Japanese Encephalitis Vaccine
As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and

| | |
|---|---|
| 2. | Select an Event Code from the drop down menu. |
| 3. | Select the Provider from drop down menu. |



RHRP 2012 Store and Forward Tracking Module Report

MODIFY FILTERS ✦ REPORT LEGEND

Report Selection Criteria

Event Code:

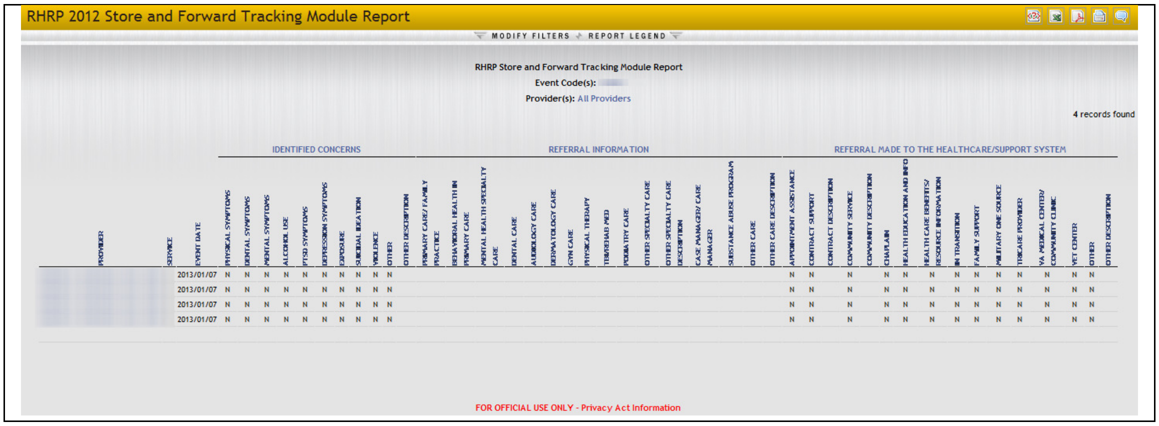
Provider:

Optional Filter Criteria

No Optional Filter Criteria

Run Report

| | |
|---|---|
| 4. | Click **Run Report**. |



RHRP 2012 Store and Forward Tracking Module Report
MODIFY FILTERS
REPORT LEGEND

RHRP Store and Forward Tracking Module Report

Event Code(s): [redacted]

Provider(s): All Providers

4 records found

| | | | IDENTIFIED CONCERNS | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| PROVIDER | SERVICE | EVENT DATE | PHYSICAL SYMPTOMS | DENTAL SYMPTOMS | MENTAL SYMPTOMS | ALCOHOL USE | PTSD SYMPTOMS | DEPRESSION SYMPTOMS | EXPOSURE | SUICIDAL IDEATION | VIOLENCE | OTHER | OTHER DESCRIPTION |
| [redacted] | [redacted] | 2013/01/07 | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | N | N | N | N | N | N | N | N | |

| | | | REFERRAL INFORMATION | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| PROVIDER | SERVICE | EVENT DATE | PRIMARY CARE/ FAMILY PRACTICE | BEHAVIORAL HEALTH IN PRIMARY CARE | MENTAL HEALTH SPECIALTY CARE | DENTAL CARE | AUDIOLOGY CARE | DERMATOLOGY CARE | GYN CARE | PHYSICAL THERAPY | TBI/REHAB MED | PODIATRY CARE | OTHER SPECIALTY CARE | OTHER SPECIALTY CARE DESCRIPTION | CASE MANAGER/ CARE MANAGER | SUBSTANCE ABUSE PROGRAM | OTHER CARE | OTHER CARE DESCRIPTION |
| [redacted] | [redacted] | 2013/01/07 | | | | | | | | | | | | | | | | |
| [redacted] | [redacted] | 2013/01/07 | | | | | | | | | | | | | | | | |
| [redacted] | [redacted] | 2013/01/07 | | | | | | | | | | | | | | | | |
| [redacted] | [redacted] | 2013/01/07 | | | | | | | | | | | | | | | | |

| | | | REFERRAL MADE TO THE HEALTHCARE/SUPPORT SYSTEM | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| PROVIDER | SERVICE | EVENT DATE | APPOINTMENT ASSISTANCE | CONTRACT SUPPORT | CONTRACT DESCRIPTION | COMMUNITY SERVICE | COMMUNITY DESCRIPTION | CHAPLAIN | HEALTH EDUCATION AND INFO | HEALTH CARE BENEFITS/ RESOURCE INFORMATION | IN TRANSITION | FAMILY SUPPORT | MILITARY ONE SOURCE | TRICARE PROVIDER | VA MEDICAL CENTER/ COMMUNITY CLINIC | VET CENTER | OTHER | OTHER DESCRIPTION |
| [redacted] | [redacted] | 2013/01/07 | N | N | | N | | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | | N | | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | | N | | N | N | N | N | N | N | N | N | N | N | |
| [redacted] | [redacted] | 2013/01/07 | N | N | | N | | N | N | N | N | N | N | N | N | N | N | |

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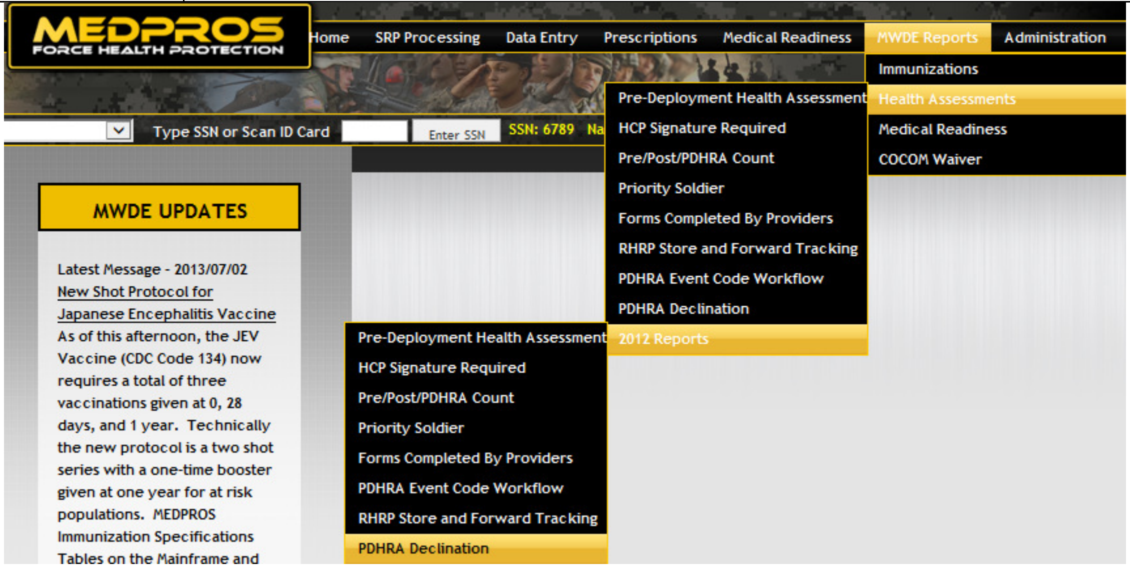
### 5.2.9.8PDHRA Declination

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Health Assessments, 2012 Reports and select PDHRA Declination. |
| |  |
| 2. | Select Personnel Type. |
| 3. | Select Date Range or accept default of today’s date only. |
| 4. | Select Report Format. |

MEDPROS
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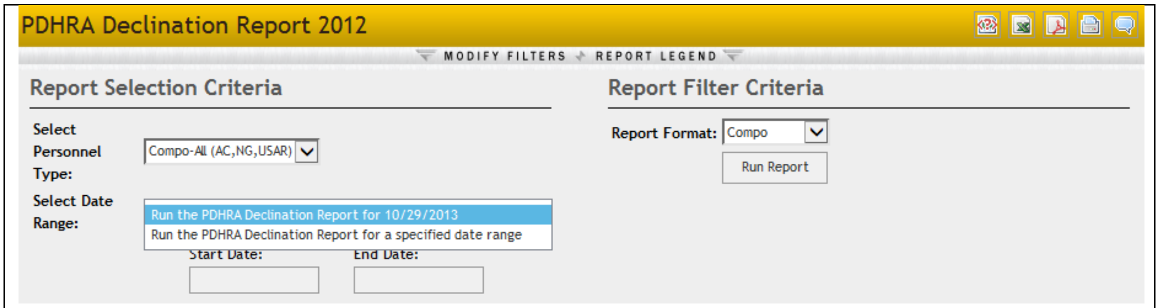
Health Assessments
Medical Readiness
COCOM Waiver
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
RHRP Store and Forward Tracking
PDHRA Event Code Workflow
PDHRA Declination
2012 Reports
Pre-Deployment Health Assessment
HCP Signature Required
Pre/Post/PDHRA Count
Priority Soldier
Forms Completed By Providers
PDHRA Event Code Workflow
RHRP Store and Forward Tracking
PDHRA Declination
Type SSN or Scan ID Card
Enter SSN
SSN: 6789
Na
MWDE UPDATES

Latest Message - 2013/07/02

New Shot Protocol for Japanese Encephalitis Vaccine

As of this afternoon, the JEV Vaccine (CDC Code 134) now requires a total of three vaccinations given at 0, 28 days, and 1 year. Technically the new protocol is a two shot series with a one-time booster given at one year for at risk populations. MEDPROS Immunization Specifications Tables on the Mainframe and


PDHRA Declination Report 2012
MODIFY FILTERS
REPORT LEGEND

Report Selection Criteria

Select Personnel Type: Compo-All (AC,NG,USAR)

Select Date Range: Run the PDHRA Declination Report for 10/29/2013
Run the PDHRA Declination Report for a specified date range

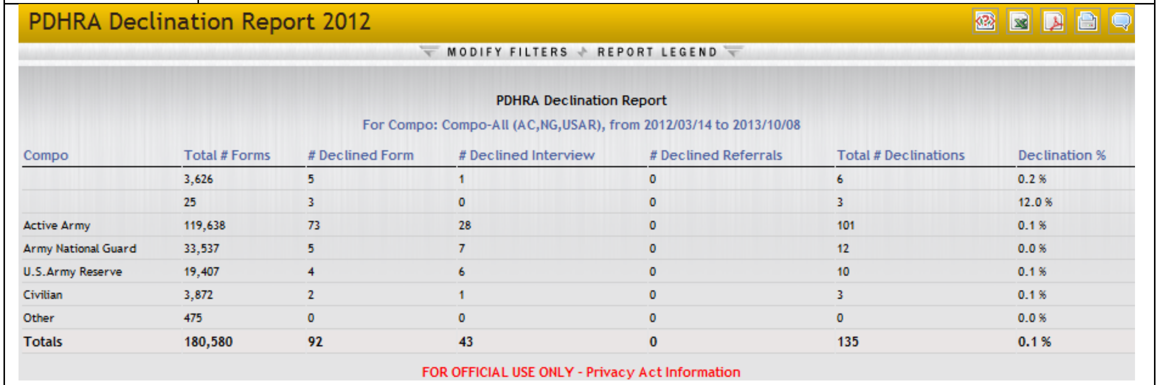
Start Date:
End Date:

Report Filter Criteria

Report Format: Compo

Run Report

| | |
|---|---|
| 5. | Click **Run Report**. |


PDHRA Declination Report 2012
MODIFY FILTERS
REPORT LEGEND

PDHRA Declination Report

For Compo: Compo-All (AC,NG,USAR), from 2012/03/14 to 2013/10/08

| Compo | Total # Forms | # Declined Form | # Declined Interview | # Declined Referrals | Total # Declinations | Declination % |
|---|---|---|---|---|---|---|
| | 3,626 | 5 | 1 | 0 | 6 | 0.2 % |
| | 25 | 3 | 0 | 0 | 3 | 12.0 % |
| Active Army | 119,638 | 73 | 28 | 0 | 101 | 0.1 % |
| Army National Guard | 33,537 | 5 | 7 | 0 | 12 | 0.0 % |
| U.S.Army Reserve | 19,407 | 4 | 6 | 0 | 10 | 0.1 % |
| Civilian | 3,872 | 2 | 1 | 0 | 3 | 0.1 % |
| Other | 475 | 0 | 0 | 0 | 0 | 0.0 % |
| Totals | 180,580 | 92 | 43 | 0 | 135 | 0.1 % |

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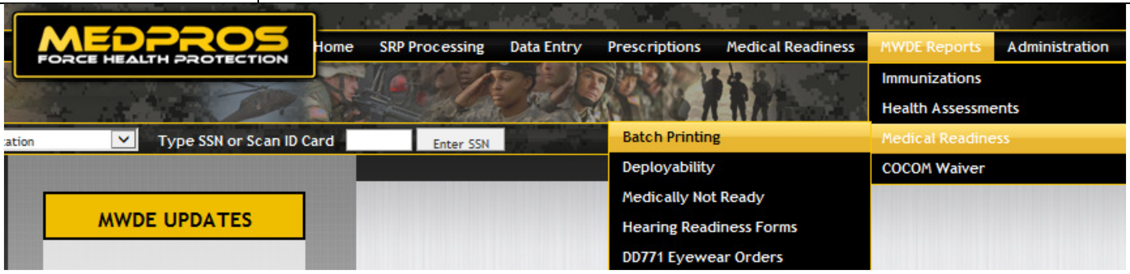
## 5.3 Medical Readiness

### 5.3.1 Batch Printing

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Medical Readiness, select Batch Printing. |


MEDPROS
FORCE HEALTH PROTECTION
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SRP Processing
Data Entry
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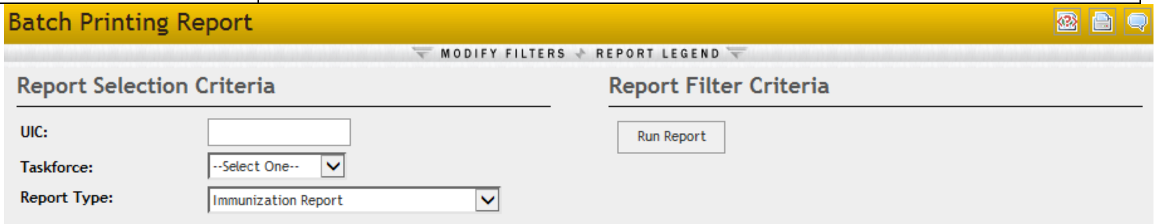
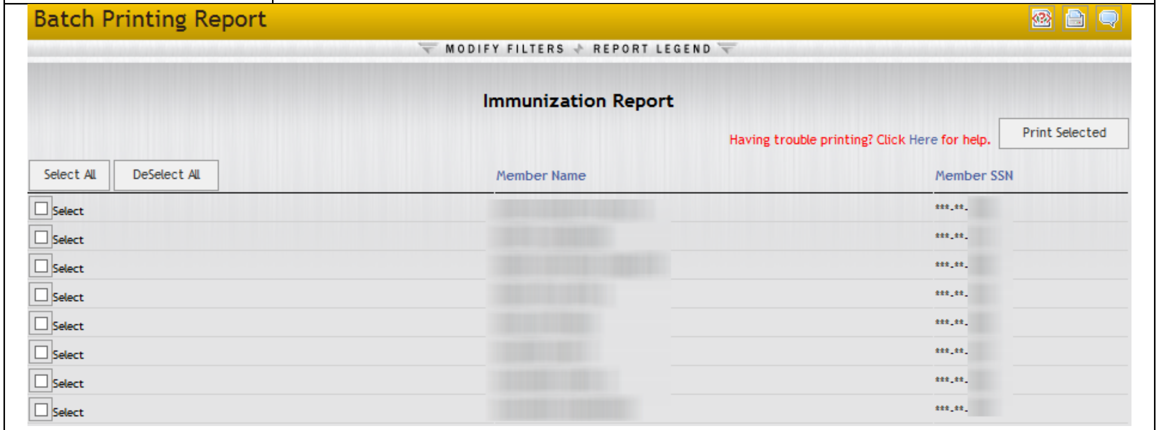
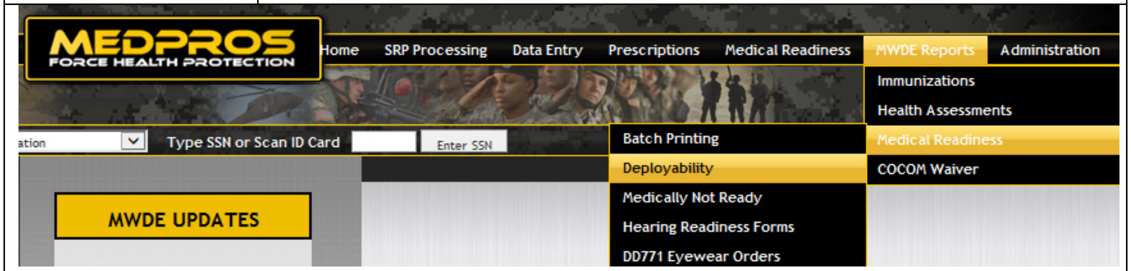
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Batch Printing
Deployability
Medically Not Ready
Hearing Readiness Forms
DD771 Eyewear Orders
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

| | |
|---|---|
| 2. | Enter UIC for Unit you want to batch print forms for. |
| 3. | Select Report Type from the drop down menu. (**NOTE**: Other filters may appear based on the selection made, complete those fields as necessary to make reports accurate (i.e. SRP Type; Deployment date, |

| Step | What to do |
|---|---|
| | Imm Profile to measure by, and whether deployment is to Malaria endemic area) |
|  | Batch Printing Report<br>MODIFY FILTERS · REPORT LEGEND<br>Report Selection Criteria<br>UIC:<br>Taskforce: --Select One--<br>Report Type: Immunization Report<br>Report Filter Criteria<br>Run Report |
| 4. | Click **Run Report**. |
|  | Batch Printing Report<br>MODIFY FILTERS · REPORT LEGEND<br>Immunization Report<br>Having trouble printing? Click Here for help.<br>Print Selected<br>Select All · DeSelect All · Member Name · Member SSN<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**-<br>☐ Select · ***-**- |
| 5. | Select Members you want printed forms for by checking the boxes to the left of their names. (NOTE: you can either select all or deselect all by clicking on those buttons (appropriate when selecting majority of unit, as you can then deselect the names you do not want reports for). |
| 6. | Click Print Selected which is located at the top right of the page. |

### 5.3.2 Deployability

| Step | What to do | Expected Results |
|---|---|---|
| 1. | Hover over MWDE Reports, down to Medical Readiness, select Deployability. | |


MEDPROS
FORCE HEALTH PROTECTION
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SRP Processing
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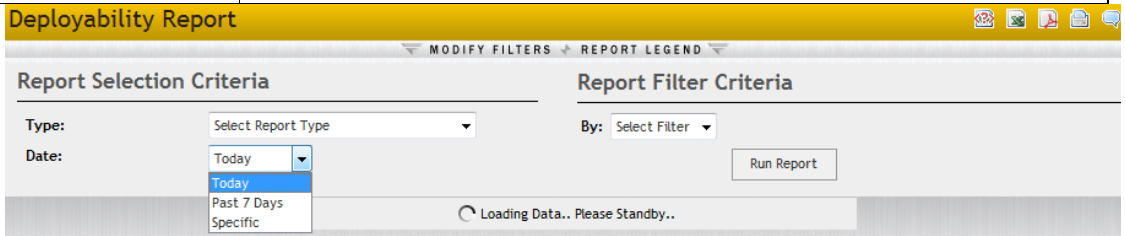
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Batch Printing
Deployability
Medically Not Ready
Hearing Readiness Forms
DD771 Eyewear Orders
ation
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

| Step | What to do | Expected Results |
|---|---|---|
| 2. | Select Soldier Type from the drop down menu. | |
| 3. | Select the Date from the drop down menu. (if "Specific" is selected, you will be prompted to enter start and end dates) | |
| 4. | Select your LID, location, or UIC in the "By" drop down menu. If UIC selected, enter UIC in the box that will appear. | |


Deployability Report
MODIFY FILTERS
REPORT LEGEND
Report Selection Criteria
Report Filter Criteria
Today
Past 7 Days
Specific
Run Report

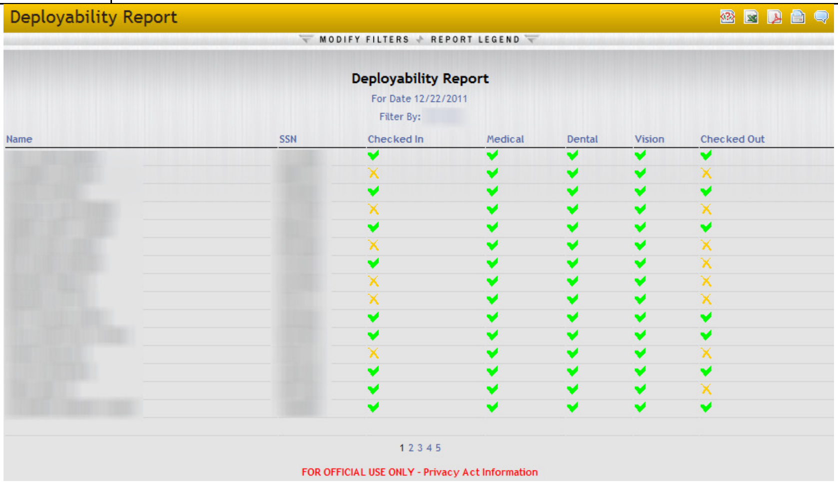
Type: Select Report Type

Date: Today

By: Select Filter

Loading Data.. Please Standby..

| Step | What to do | Expected Results |
|---|---|---|
| 5. | Click **Run Report**. | |


Deployability Report
MODIFY FILTERS
REPORT LEGEND

**Deployability Report**

For Date 12/22/2011

Filter By: [redacted]

| Name | SSN | Checked In | Medical | Dental | Vision | Checked Out |
|---|---|---|---|---|---|---|
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | X | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | X |
| [redacted] | [redacted] | ✓ | ✓ | ✓ | ✓ | ✓ |

1 2 3 4 5

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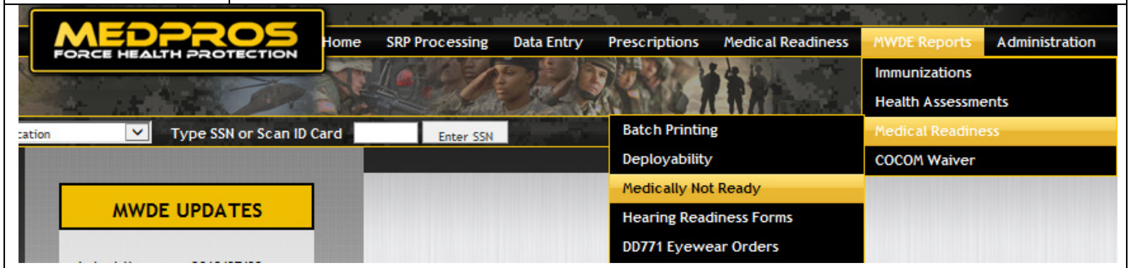
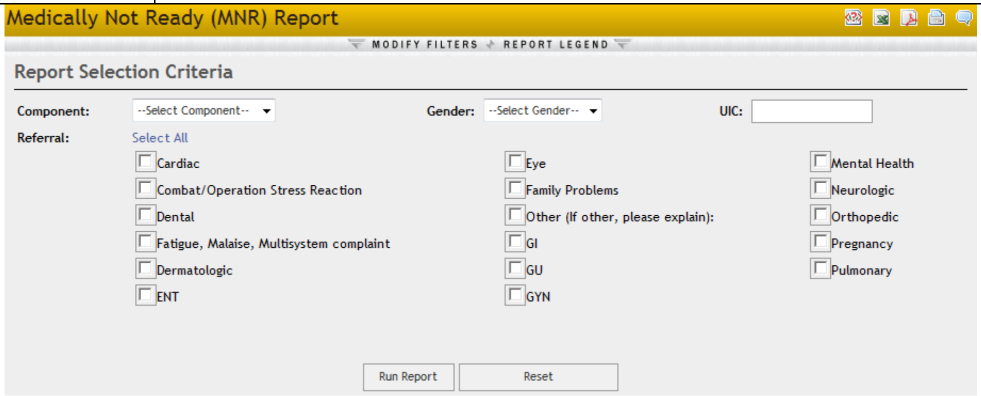
### 5.3.3 Medically Not Ready

| Step | What to do | Expected Results |
|---|---|---|
| 1. | Hover over MWDE Reports, down to Medical Readiness, and select Medically Not Ready (MNR). | |


MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Batch Printing
Deployability
Medically Not Ready
Hearing Readiness Forms
DD771 Eyewear Orders
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

| Step | What to do | Expected Results |
|---|---|---|
| 2. | Select Component. | |
| 3. | Select Gender. | |
| 4. | Enter UIC. | |
| 5. | Select those referral types as necessary. One can click **Select All** if all are wanted. If "Other" is selected, you must enter type in the "Other" text box that will appear at bottom left. | |


Medically Not Ready (MNR) Report

MODIFY FILTERS
REPORT LEGEND

Report Selection Criteria

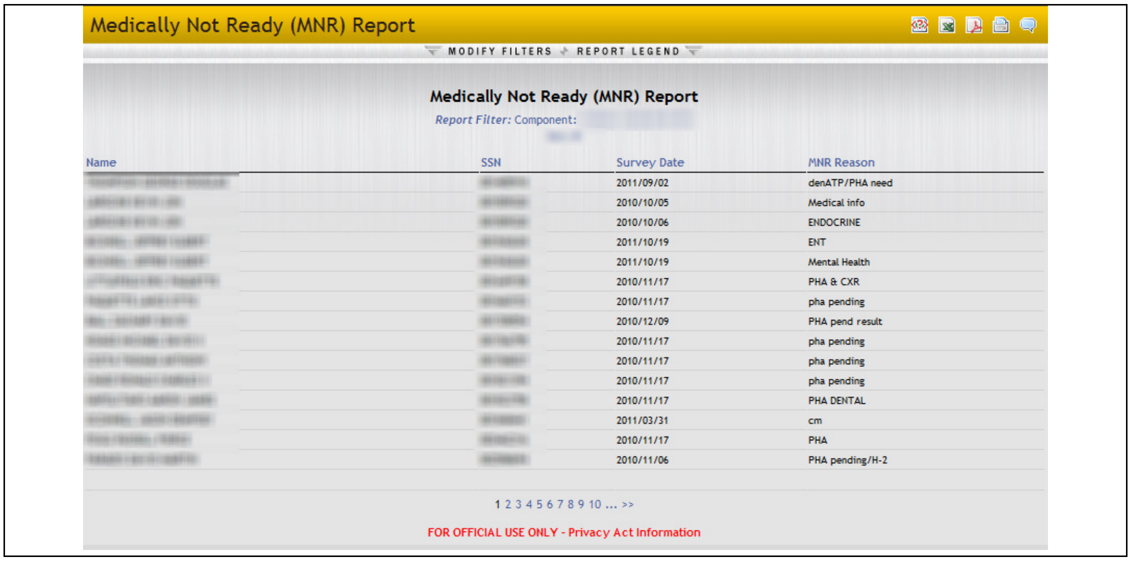
**Component:** --Select Component-- **Gender:** --Select Gender-- **UIC:**

**Referral:** Select All

☐ Cardiac
☐ Combat/Operation Stress Reaction
☐ Dental
☐ Fatigue, Malaise, Multisystem complaint
☐ Dermatologic
☐ ENT
☐ Eye
☐ Family Problems
☐ Other (If other, please explain):
☐ GI
☐ GU
☐ GYN
☐ Mental Health
☐ Neurologic
☐ Orthopedic
☐ Pregnancy
☐ Pulmonary

Run Report
Reset

| Step | What to do | Expected Results |
|---|---|---|
| 6. | Click **Run Report** to display the MNR count. | |



Medically Not Ready (MNR) Report

MODIFY FILTERS REPORT LEGEND

**Medically Not Ready (MNR) Report**

*Report Filter:* Component: [redacted]

| Name | SSN | Survey Date | MNR Reason |
|---|---|---|---|
| [redacted] | [redacted] | 2011/09/02 | denATP/PHA need |
| [redacted] | [redacted] | 2010/10/05 | Medical info |
| [redacted] | [redacted] | 2010/10/06 | ENDOCRINE |
| [redacted] | [redacted] | 2011/10/19 | ENT |
| [redacted] | [redacted] | 2011/10/19 | Mental Health |
| [redacted] | [redacted] | 2010/11/17 | PHA & CXR |
| [redacted] | [redacted] | 2010/11/17 | pha pending |
| [redacted] | [redacted] | 2010/12/09 | PHA pend result |
| [redacted] | [redacted] | 2010/11/17 | pha pending |
| [redacted] | [redacted] | 2010/11/17 | pha pending |
| [redacted] | [redacted] | 2010/11/17 | pha pending |
| [redacted] | [redacted] | 2010/11/17 | PHA DENTAL |
| [redacted] | [redacted] | 2011/03/31 | cm |
| [redacted] | [redacted] | 2010/11/17 | PHA |
| [redacted] | [redacted] | 2010/11/06 | PHA pending/H-2 |

1 2 3 4 5 6 7 8 9 10 ... >>

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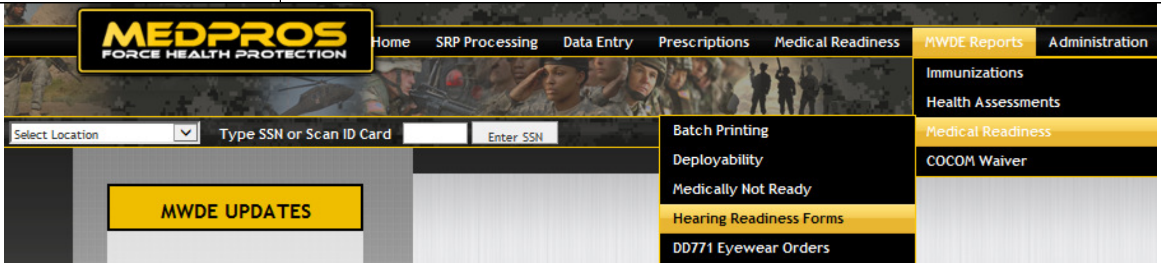
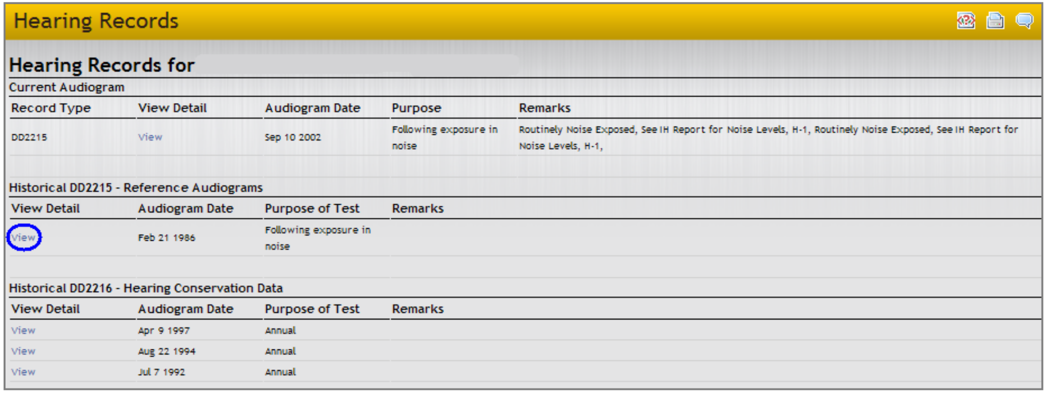
### 5.3.4 Hearing Readiness Forms

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Medical Readiness, select Hearing Readiness Forms. |
|  |  |
| 2. | Click View to view the details of the record in PDF format. |
|  |  |

MEDPROS
FORCE HEALTH PROTECTION
Home
SRP Processing
Data Entry
Prescriptions
Medical Readiness
MWDE Reports
Administration
Immunizations
Health Assessments
Medical Readiness
COCOM Waiver
Batch Printing
Deployability
Medically Not Ready
Hearing Readiness Forms
DD771 Eyewear Orders
Select Location
Type SSN or Scan ID Card
Enter SSN
MWDE UPDATES

Hearing Records

**Hearing Records for** [redacted]

Current Audiogram

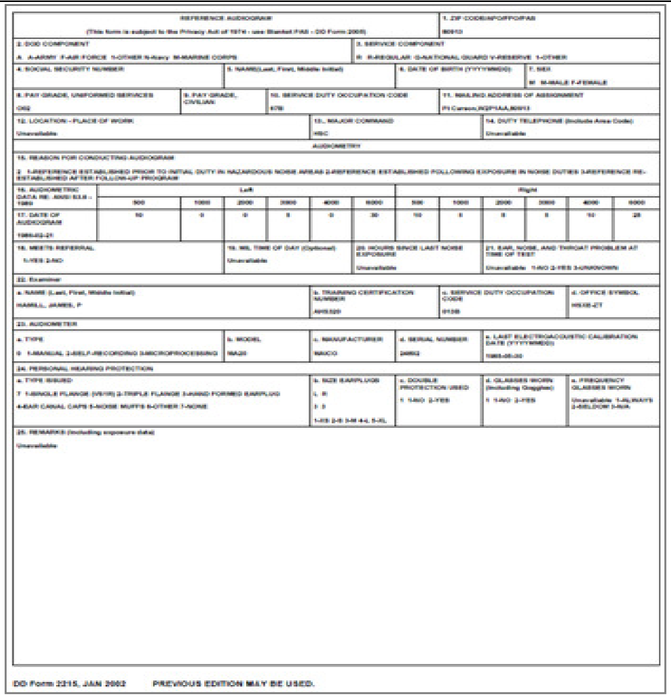
| Record Type | View Detail | Audiogram Date | Purpose | Remarks |
|---|---|---|---|---|
| DD2215 | View | Sep 10 2002 | Following exposure in noise | Routinely Noise Exposed, See IH Report for Noise Levels, H-1, Routinely Noise Exposed, See IH Report for Noise Levels, H-1, |

Historical DD2215 - Reference Audiograms

| View Detail | Audiogram Date | Purpose of Test | Remarks |
|---|---|---|---|
| View | Feb 21 1986 | Following exposure in noise |  |

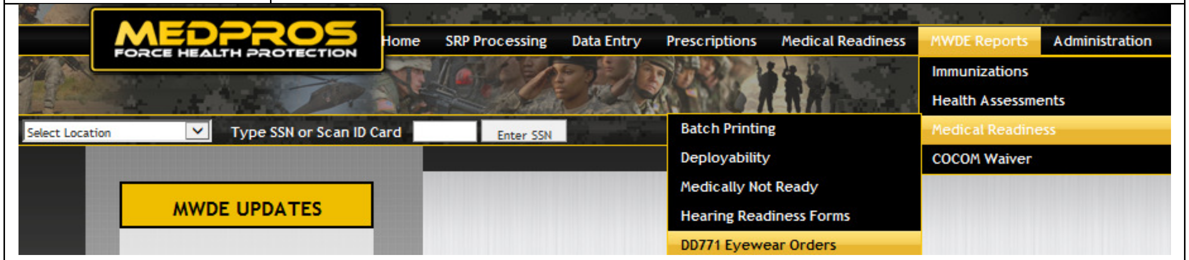
Historical DD2216 - Hearing Conservation Data

| View Detail | Audiogram Date | Purpose of Test | Remarks |
|---|---|---|---|
| View | Apr 9 1997 | Annual |  |
| View | Aug 22 1994 | Annual |  |
| View | Jul 7 1992 | Annual |  |

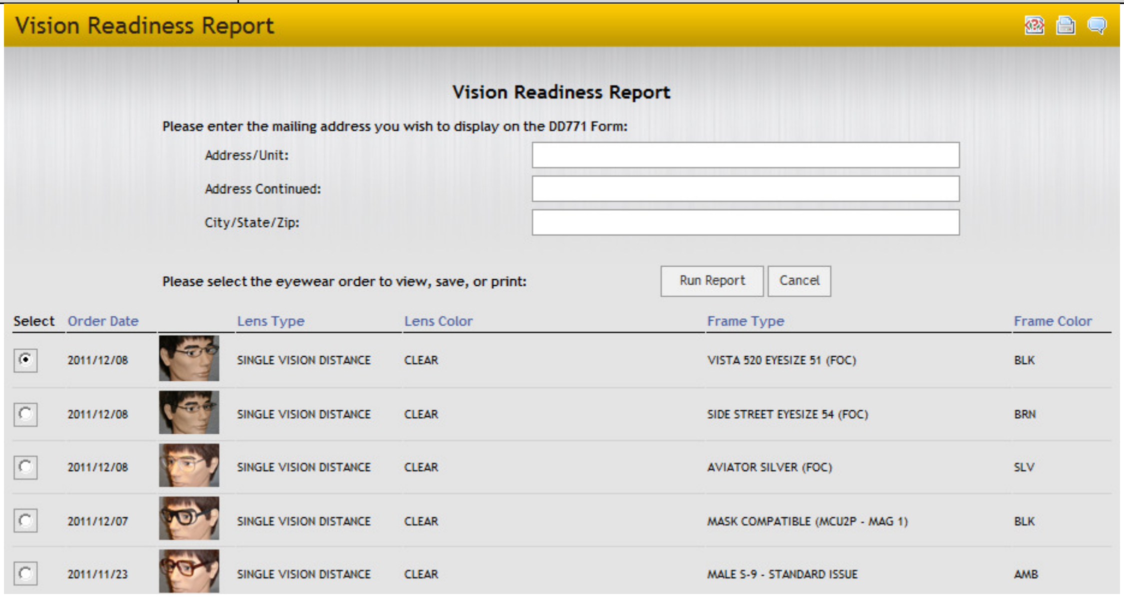


DD Form 2215, JAN 2002 PREVIOUS EDITION MAY BE USED.

### 5.3.5 DD771 Eyewear Orders

| Step | What to do |
|---|---|
| 1. | Hover over MWDE Reports, down to Medical Readiness, select DD771 Eyewear Orders. Eyewear prescriptions for Soldier whose personnel data is active will be displayed. |
|  MEDPROS<br>FORCE HEALTH PROTECTION<br>Home<br>SRP Processing<br>Data Entry<br>Prescriptions<br>Medical Readiness<br>MWDE Reports<br>Administration<br>Immunizations<br>Health Assessments<br>Medical Readiness<br>COCOM Waiver<br>Select Location<br>Type SSN or Scan ID Card<br>Enter SSN<br>Batch Printing<br>Deployability<br>Medically Not Ready<br>Hearing Readiness Forms<br>DD771 Eyewear Orders<br>MWDE UPDATES | |
| 2. | If you desire to print an eyewear prescription, enter Address information (where glasses will be shipped) and choose the prescription from the selections offered by clicking the corresponding radio button. |

| Step | What to do |
|---|---|



Vision Readiness Report

**Vision Readiness Report**

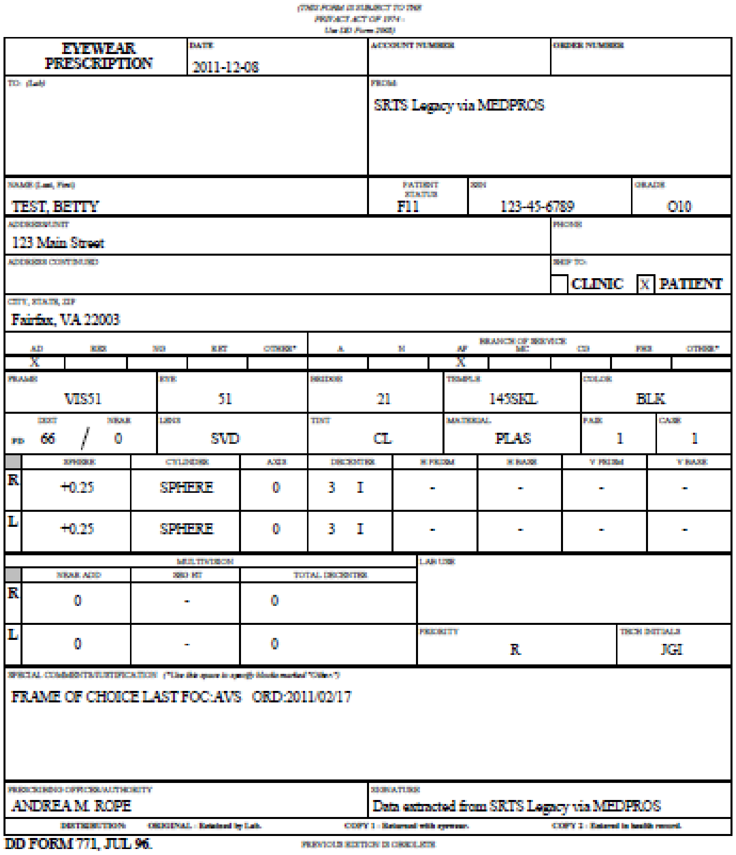
Please enter the mailing address you wish to display on the DD771 Form:

Address/Unit:
Address Continued:
City/State/Zip:

Please select the eyewear order to view, save, or print:

| Select | Order Date | | Lens Type | Lens Color | Frame Type | Frame Color |
|---|---|---|---|---|---|---|
| ● | 2011/12/08 | | SINGLE VISION DISTANCE | CLEAR | VISTA 520 EYESIZE 51 (FOC) | BLK |
| ○ | 2011/12/08 | | SINGLE VISION DISTANCE | CLEAR | SIDE STREET EYESIZE 54 (FOC) | BRN |
| ○ | 2011/12/08 | | SINGLE VISION DISTANCE | CLEAR | AVIATOR SILVER (FOC) | SLV |
| ○ | 2011/12/07 | | SINGLE VISION DISTANCE | CLEAR | MASK COMPATIBLE (MCU2P - MAG 1) | BLK |
| ○ | 2011/11/23 | | SINGLE VISION DISTANCE | CLEAR | MALE 5-9 - STANDARD ISSUE | AMB |

| | |
|---|---|
| 3. | Click Run Report. A PDF View of Eyewear Prescription form will be displayed. |



(THIS FORM IS SUBJECT TO THE
PRIVACY ACT OF 1974 -
Use DD Form 2005)

| | | | |
|---|---|---|---|
| **EYEWEAR PRESCRIPTION** | DATE<br>2011-12-08 | ACCOUNT NUMBER | ORDER NUMBER |

| | |
|---|---|
| TO: (Lab) | FROM<br>SRTS Legacy via MEDPROS |

| | | | |
|---|---|---|---|
| NAME (Last, First)<br>TEST, BETTY | PATIENT STATUS<br>F11 | SSN<br>123-45-6789 | GRADE<br>O10 |

| | |
|---|---|
| ADDRESS/UNIT<br>123 Main Street | PHONE |
| ADDRESS CONTINUED | SHIP TO:<br>☐ CLINIC ☒ PATIENT |

CITY, STATE, ZIP
Fairfax, VA 22003

BRANCH OF SERVICE

| AD | RES | NG | RET | OTHER* | A | N | AF | MC | CG | PHS | OTHER* |
|---|---|---|---|---|---|---|---|---|---|---|---|
| X | | | | | | | X | | | | |

| | | | | | |
|---|---|---|---|---|---|
| FRAME<br>VIS51 | EYE<br>51 | BRIDGE<br>21 | TEMPLE<br>145SKL | COLOR<br>BLK | |
| PD DIST / NEAR<br>66 / 0 | LENS<br>SVD | TINT<br>CL | MATERIAL<br>PLAS | PAIR<br>1 | CASE<br>1 |

| | SPHERE | CYLINDER | AXIS | DECENTER | H PRISM | H BASE | V PRISM | V BASE |
|---|---|---|---|---|---|---|---|---|
| R | +0.25 | SPHERE | 0 | 3 I | - | - | - | - |
| L | +0.25 | SPHERE | 0 | 3 I | - | - | - | - |

MULTIVISION

| | NEAR ADD | SEG HT | TOTAL DECENTER |
|---|---|---|---|
| R | 0 | - | 0 |
| L | 0 | - | 0 |

LAB USE

| | |
|---|---|
| PRIORITY<br>R | TECH INITIALS<br>JGI |

SPECIAL COMMENTS/JUSTIFICATION (*Use this space to specify blocks marked "Other.")
FRAME OF CHOICE LAST FOC:AVS ORD:2011/02/17

| | |
|---|---|
| PRESCRIBING OFFICER/AUTHORITY<br>ANDREA M. ROPE | SIGNATURE<br>Data extracted from SRTS Legacy via MEDPROS |

DISTRIBUTION: ORIGINAL - Retained by Lab. COPY 1 - Returned with eyewear. COPY 2 - Entered in health record.

DD FORM 771, JUL 96. PREVIOUS EDITION IS OBSOLETE.